Utah Higher Education Health Behavior Behortah Higher Health Education Health Educat**10**1 Behavior **Final Report** Behavi ation 2007 Funded through the Federal **Center for Substance Abuse** Educat**10**1 **Prevention (CSAP)** Utah Hig This report was prepared for the State of Utah by: Bach Harrison, L.L.C. 116 South 500 East Salt Lake City, Utah 84102 Behav Published October 2007 Education Utah Higher Education Health Deni Survey Utah Higher Education Health Behavior Survey Utah Higher Education

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State of Utah **Department of Human Services** Division of Substance Abuse and Mental Health

Utah Higher Education Health Behavior Survey 2007 Results

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During the spring of 2007, the Utah Division of Substance Abuse and Mental Health (DSAMH) conducted a third statewide survey of college students called the Utah Higher Education Health Behavior Survey (College Survey). The first college survey was conducted in the spring of 2003 with 4,658 participants from nine Utah Public colleges (two colleges collected additional data in the spring of 2004, for a total of 6336 surveys included in the 2003 data). The 2005 survey was completed by a total of 11,828 students attending the nine Utah public colleges and Westminster College. In 2007, the survey was completed by 10,186 students from nine public colleges. (Only the results from the nine public colleges are presented in this report, including sections where data from the 2005 administration are presented.) The participating public colleges include College of Eastern Utah (CEU), Dixie State College (Dixie), Salt Lake Community College (SLCC), Snow College (SNOW), Southern Utah University (SUU), University of Utah (UU), Utah State University (USU), Utah Valley State College (UVSC), and Weber State University (Weber).

The College Survey has several objectives: 1) assess the prevalence of alcohol, tobacco, and other drug (ATOD) use on Utah campuses, 2) measure the need for substance abuse treatment by college students, 3) gain information about health and safety issues facing college students, 4) measure students' perception of substance abuse prevention and policies on campus, 5) measure the levels of selected risk factors for substance abuse. and 6) compare the results across survey administrations (2003, 2005, and 2007).

Survey Sample, Completion Rate, and the Ability to Generalize the Results

The Utah College Survey was designed to provide valid results at the state level as well as the individual campus level. Thus, the survey was designed to sample students from each college according to the population of the college and the number of students in each college class level (freshmen, sophomore, junior and senior). The survey was designed to sample 9,670 students across the state which would allow analyses for each college by class level. This goal was nearly met by the colleges (8551 surveys were completed, not **Education Survey** including oversamples of select groups such as was conducted by the Utah fraternities, sororities, and athletes that were Department of Human Services, collected by some campuses.) A comparison **Division of Substance Abuse** between the demographics of those who and Mental Health and completed the survey and all students enrolled Bach Harrison, in Utah colleges showed that the characteristics of the survey sample were similar to the Utah college population. Thus, the survey produced sufficient data to allow analyses that can be used for prevention and treatment planning for Utah's college population. The analyses of the 2007 College Survey data included weighting the data to account for the large representation of students at the smaller campuses. For example, The College of Eastern Utah accounted for 8.4% of the sample, yet only comprises 1.6% of the total Utah campus enrollment. Thus, without weighting, CEU would be over-represented in the state-wide analysis.

Summary of Results

Lifetime Use of Alcohol, Tobacco, and Other Drugs (ATODs)

It is obvious from the survey results shown in Table 1 on the following page that fewer Utah college students report having used substances in their lifetime than other students in the United States. The national survey that was used for comparison is the University of Michigan survey called Monitoring the Future (MTF). The latest results from the MTF survey are from 2005. Having comparison groups is important to better understand the results of the Utah College Survey. Utah students have a lifetime use rate of alcohol, marijuana, and ecstasy that is less than one-half the rate of the national sample. The substances most often used at least once by Utah students are alcohol (42.7%), cigarettes (28.9%), and marijuana (24.1%).

A comparison of the results from 2003 to 2007 reveals that the use rates for most substances are fairly similar across the three survey periods. Within this consistency, there are some trends that can be seen. One class of drugs, heroin and other opiates, appears to be increasing over time for lifetime and past year use. (This is a relatively low-use drug compared to tobacco, alcohol and marijuana.) Lifetime use of several other drugs appears to be decreasing over time. For example, lifetime use of stimulants, ecstasy and other club drugs has decreased.

Past Year ATOD Use

As with lifetime use, the ATOD past year use rate for the national sample is substantially higher than the Utah sample. For all drugs that have comparable national data from the Monitoring the Future survey, Utah has lower past year use rates. For ecstasy, Utah use rates are approximately half of the national estimate, and for all other drugs except sedatives, Utah use rates are even smaller relative to the national sample. Alcohol is the substance most used in the past year, with 29.9% of Utah students reporting use, as compared to 83.0% of the national sample. Marijuana is the next highest, with 7.8% of Utah students reporting use, as compared to 33.3% of the national sample.

Comparisons of 2007 to 2003 and 2005 past year use rates provide information about trends in use over time. Past year alcohol use rates have remained fairly constant, while past year marijuana and stimulant use appears to have decreased over time. Sedative use rates appear to have increased (however, an outdated wording of the sedatives question in 2003 may have caused students to underreport usage of sedatives in that year.) Past year opiate use appears to have increased over time. Past year any drug use appears to be on a slight downward trend from 2003 to 2007.

Past Month ATOD Use

Current substance use by Utah college students (use in the 30 days prior to the survey) is much lower than students nationally. Like use in the past year, Utah students have less than one-third the rate of use in the past 30 days for cigarettes, alcohol, marijuana, cocaine, stimulants, and hallucinogens as other students in the United States. While still lower than the national rates, opiates, inhalants, and ecstasy use rates for Utah college students are more similar to national rates than other substances. One notable exception is sedatives, in which Utah students have the same or slightly higher use rates than the national sample.

Past 30 day use rates from 2003 to 2007 appear to show a decreasing trend for tobacco, marijuana, cocaine, stimulants, and other club drugs. Overall drug use also appears to show a slight decrease over time. Heroin and other opiate use appears to have gone up since 2003. The differences across time are quite small and should be interpreted with caution.

Executive Summary Table 1: Lifetime, Past Year, and 30-Day Substance Use Utah Survey Results (2003, 2005, 2007) Compared to National Monitoring the Future (MTF) Survey Results (2006)

	Lifetime					Past Year				30-Day			
Substance	Utah 2003	Utah 2005	Utah 2007	MTF 2006	Utah 2003	Utah 2005	Utah 2007	MTF 2006	Utah 2003	Utah 2005	Utah 2007	MTF 2006	
Tobacco (Cigarettes or Smokeless Tobacco)	27.1	32.7	29.4						9.5	8.7	7.1		
Cigarette	25.7	31.4	28.9						8.6	7.9	6.4	19.2	
Chewing tobacco	9.9	11.6	9.8						1.5	1.6	1.4		
Alcohol	39.7	44.1	42.7	84.7	27.8	30.4	29.9	82.1	20.4	22.1	21.9	65.4	
Marijuana	24.0	26.4	24.1	46.9	10.2	9.1	7.8	30.2	5.4	4.6	3.9	16.7	
Cocaine	6.6	7.0	6.5	7.7	1.8	1.8	1.6	5.1	0.7	0.5	0.4	1.8	
Stimulants (Meth or Other)	13.0	6.0	6.6	10.7	5.2	1.8	1.9	6.0	2.7	0.6	0.7	2.5	
Methamphetamine**	4.4		4.4	2.9	0.9		0.6	1.2	0.4		0.0	0.2	
Non-Meth Stimulants	11.8		4.1		4.7		1.5		2.4		0.7		
Sedatives***	5.8	9.0	7.9	6.3/10.0	2.5	5.8	5.3	3.4/5.8	1.3	2.6	2.4	1.3/2.1	
Hallucinogens	8.0	8.8	7.8	10.6	2.1	1.6	1.5	5.6	0.4	0.4	0.3	0.9	
Heroin and other opiates****	2.3	4.9	5.1	0.7/14.6	0.5	2.2	3.4	0.3/8.8	0.3	1.0	1.3	0.2/3.1	
Inhalants	4.7	6.6	5.5	7.4	0.5	0.8	0.7	1.5	0.2	0.2	0.2	0.4	
DXM		3.4	2.9			0.8	0.7			0.2	0.2		
Ecstasy	5.7	4.8	4.2	6.9	1.9	1.5	1.5	2.6	0.4	0.4	0.4	0.6	
Other club drugs	2.3	2.0	1.4		0.8	0.4	0.2		0.4	0.1	0.1		
Any Drug	30.2	30.2	28.6	50.6	15.5	14.0	13.4	33.9	9.0	7.4	7.2	19.2	

^{* ---} Indicates an area where data could not be gathered or is not available.

^{**} In 2005, methamphetamines were included under stimulants. In 2003 and 2007, the category was separated into "Methamphetamines" and "Stimulants other than methamphetamines."

^{***}MTF Sedatives are reported as Sedatives/Tranquilizers

^{****}MTF Heroin Use is reported as Heroin/Other Narcotics

ATOD Use by Participant Characteristics

Binge drinking is defined as drinking five or more drinks at a sitting on one or more occasions in the two weeks prior to taking the survey. In 2007, males engaged in binge drinking only slightly more than females (males = 11.6%, females = 10.4%). This is a smaller difference than in 2005 when the gender difference was more pronounced (males = 14.0%, females = 9.7%). Meanwhile, significantly more female respondents engaged in past 30 day alcohol use than males. Part-time students binge drink more than full-time students (13.0% compared to 10.0%). While the results need to be interpreted with caution due to low numbers, the individuals that are most likely to engage in binge drinking are fraternity or sorority members with a rate of 48.4%, cohabitating students (31.0%), students from other countries (16.9%, which is quite a bit lower than the 2005 rate of 29.2%), non-LDS students, and students who rarely or never attend religious activities. While students from other countries tend to drink alcohol more than other students, they use less marijuana and other drugs than students from Utah. Students from other states tend to use drugs more than Utah students. Perhaps the most consistent predictors of ATOD use among Utah college students are grade point average, attendance at religious services, and religious preference. Use of ATODs decreases with increased grade point average and increased attendance at religious activities, and is very low for members of the LDS religion.

Risk and Protective Factors

In order to validate the risk factor approach with college students, the freshmen from the 2005 and 2007 College Surveys are compared to students in grade 12 from the 2007 Utah Student Health and Risk Prevention Survey (SHARP). Because not all high school seniors go on to college, the match between freshmen and 12th grade students would not be expected to be exact. Levels of risk for Utah college freshmen, Utah college

undergraduates (including freshmen, sophomores, juniors, and seniors), and Utah 12th grade students can be seen in Table 2. The college freshmen tend to be more at risk than the high school seniors for attitudes favorable toward drug use, and high school seniors tend to be more at risk for perceived availability of drugs, depression and rebelliousness.

Depressive Symptoms

Rates of reporting depressive symptoms were compared for the following three groups: college freshmen, all college students, and Utah 12th graders. Over twice as many 12th graders as college students are at risk on the depressive symptoms scale. A review of responses on the four-point scale, 1) Definitely Not True, 2) Mostly Not True, 3) Mostly True, and 4) Definitely True, shows that the lower percentage for college students is a result of their reporting a much higher rate of "Definitely Not True" and a much lower rate of "Mostly True" to the following four items: Sometimes I think that life if not worth it; At times I think that I am no good at all: All in all. I am inclined to think that I am a failure; In the past year, have you felt depressed or sad MOST days, even if you felt OK sometimes. The differences between college students and 12th grade students held for all four items as well as for freshmen and all college students. Thus, it appears that high school students who choose to attend college do not report as high a rate of depressive symptoms as students who do not attend college.

Perceived Availability

A review of the scale items for availability of drugs shows that age of students certainly has an effect on their responses. For example, older students rate alcohol as easier to get than freshmen and 12th grade students, while a greater percentage of 12th grade students rate marijuana as very easy to get (55.4% of 12th graders compared to 46.1% of college students).

Executive Summary Table 2: Risk Factors for Freshmen, All College Students, and 12th Grade High School
Students - Weighted Utah Data

			Percent at Risk		
Risk Factors	2007 Grade 12 SHARP	2005 College Freshmen	2007 College Freshmen	2005 College Undergrad	2007 College Undergrad
Perceived availability of drugs scale	35.0	26.7	24.5	25.1	25.0
Attitudes favorable to drug use scale	20.8	28.6	26.6	31.3	31.9
Perceived risk of drug use scale	22.6	20.8	21.1	22.3	22.5
Rebelliousness scale	35.1	23.7	22.9	21.1	20.2
Depressive symptoms scale	34.6	16.5	16.7	14.3	14.8

Age of Initiation

College students were asked to report when, if ever, they first used ATODs. In calculating the average age of initiation, only the ages indicated by students who had used the substance before were taken into account. Students begin using inhalants before using any other substance. Of the college students who had used inhalants, the average age of first use was 15.3 years. Age of initiation for alcohol and marijuana are approximately the same – 16.7 and 16.9 years respectively. Age of first use of DXM (drinking cough syrup to get high) also started at a similarly young age of 16.6 years. Students who used other illegal drugs indicated that they began using them at approximately 17 to 19 years of age. The age of initiation for college students is higher than that of Utah high school seniors. On the 2007 SHARP survey, high school seniors report an average age of initiation for first sip of alcohol of 14.4 years, age of initiation for first regular use of alcohol (one or more times a month) of 15.5 years, and age of initiation for marijuana of 14.8 years. The college students have a later average of initiation of ATOD use by over three years. The earlier young people begin using ATODs the greater the likelihood that they will have problems with these behaviors later on. For example, research shows that young people who initiate drug use before age fifteen are at twice the risk of having drug problems as those who wait until after age nineteen.

Drug and Alcohol Treatment Needs

The underlying assumption of the need for treatment analysis is that if an individual receives a diagnosis of substance dependence for any of the substances surveyed, that individual is assumed to need treatment. Six questions in the survey were used to determine need for treatment. Students were asked if they had ever done any of the following in the past 12 months: spent more time using drugs/alcohol than he or she intended, neglected responsibilities because of drugs/alcohol, wanted to cut down on drugs/alcohol use, had others object to his or her alcohol or drug use, frequently thought about using drugs/alcohol, and used drugs/alcohol to relieve bad feelings. Applying the criteria that students who answer yes to three or more of the items need treatment reveals that 6.3% of students need treatment for alcohol problems and 2.5% need treatment for drug problems, with a total of 7.3% of college students needing treatment for alcohol or drug problems. This is lower than in 2005, when the survey results indicated that treatment was needed for 9.1% of students for alcohol, 4.1% for drugs, and 10.8% for alcohol or drugs.

Mental Health Treatment Needs

According to information published by the DSAMH, the Positive Mental Health Index (PMHI) is a sub-scale of the General Well-Being Schedule which focuses on symptoms and social functioning. In Utah, the PMHI has been used in statewide substance abuse need assessment studies to assist in identifying psychological distress and dysfunction. The results for college students show that more individuals have clinically significant scores than the general population (males 25.1% compared to 14.4%, females 32.8% compared to 16.9%). However, it should be noted that these norms are from 1996, and thus should be updated in order to serve as accurate norms for 2007. The survey results also indicated that 10.7% of all students had seriously considered suicide in the past year, and 1.5% had attempted suicide in the past year.

Health and Smoking Issues

Because smoking is related to many health problems, smoking prevention and treatment programs have been implemented at the state and national levels. Among youth there has been a reduction in rates of smoking over the past several years. In this survey, 8.6% in 2003 and 7.9% in 2005 and 6.4% in 2007 smoked during the past 30 days. This decrease represents a statistically significant difference. There was no decrease, however, in lifetime use rates of cigarettes, possibly indicating that regular use is decreasing while casual use is remaining stable. However, the number of individuals who smoke regularly is much less than indicated by the 30 day use rates. Only 3.3% report smoking regularly, and 4.0% report smoking at least one cigarette per day in the past 30 days. Thus, the number of everyday smokers is quite low on Utah campuses.

When smokers were asked if they had (in the past year) stopped smoking for a day or longer because they were trying to quit smoking, 41.3% reported "yes." The services that smokers would use to quit include: calling a quit line (25.4%), using a campus-based clinic or class (28.8%), counseling from a doctor or nurse (35.1%), self help materials (29.8%), or a free internet quit service (31.8%).

Health and Safety Issues

The survey questionnaire asked each student for his or her height and weight to use to calculate their body mass index (BMI). While not all students completed the height and weight questions, for those who did, the BMI was calculated and used to determine the relationship between BMI and exercise and dieting. Of all respondents who completed the height and weight questions, 5.9% were classified as underweight, 55.7% as normal, 24.8% as overweight, and 13.7% as obese. By participant characteristics, more males than females tend to be overweight (31.3% of males compared to 19.5% of females). Age and marital status also appear to be a factor, as more students over the age of 24 were classified as overweight or obese than students 24 and younger, and more married, cohabitating, separated, divorced, or widowed individuals were classified as overweight than single individuals.

Other health and safety information gathered from the survey revealed that 7.0% of Utah students reported driving under the influence (DUI) of drugs or alcohol in the past year. (On the 2006 National College Health Assessment, 22.6% of students nationwide reported driving after drinking any alcohol at all in the past 30 days and 4.1% reported driving after having 5 or more drinks in the past 30 days.). In Utah, 91.2% of students reported wearing a seatbelt all of the time or most of the time when someone else was driving, and 91.9% reported wearing a seatbelt all or most of the time when they were driving. Nationwide, 94.9% of students reported wearing a seatbelt all or most of the time while riding in a car. Of the students who rode bicycles in the past year, 58.0% of Utah students never or rarely wore a helmet (compared to 53.9% of students nationwide). Only 6.7% of Utah students and 6.2% of students nationwide eat the recommended five servings of fruits and vegetables each

Prevention Programs and Campus Policies

The College Survey contains several questions that inquire about campus ATOD prevention programs, campus policies, and student perceptions of ATOD use. Most students (68.5%) are aware that the campus has drug/alcohol policies and that campus personnel are concerned with drug/alcohol prevention (66.8%). However, over one-half (65.9%) do not know whether or not the campus has a drug/alcohol prevention program. Most students do not believe that campus drug and alcohol policies are enforced or do not know whether they are enforced (67.7%). It is interesting that most students (74.6%) support stricter discipline for repeated campus drug/alcohol violations, however, only

47.1% believe other students on campus would support stricter discipline for repeated campus drug/alcohol violations. Over three quarters of students say they would support a policy to make their campus tobacco-free.

Perceived Substance Use

In order to determine student perception of ATOD use on campus, students were asked to indicate what percentage of students they believed had used each substance in the past year. Generally, students tend to overestimate ATOD use by their peers. For example, students perceived that 41.5% of students on campus used alcohol in the past year and 20.6% used marijuana in the past year. In fact, only 29.9% actually drank alcohol in the past year, and 7.8% actually used marijuana in the past year. These results still show that students overestimate ATOD use by their peers. Since the perception of ATOD use by others influences a student's choice to use ATODs, it is important that information about actual use rates of the various substances be made available to students on campus.

Gambling

Approximately a third (32.7%) of Utah students had participated in some form of gambling in the past year. Slightly fewer students under age 21 had gambled in the past year than students who were over 21 (28.3% compared to 34.6%). Very few students had gambled on the internet (1.5%) regardless of whether they were of legal age. The most popular forms of gambling were gambling at a casino, playing cards for money, playing the lottery, and betting on sporting events and games of personal skill. Very few students (2.0%) indicated that they gambled once a week or more in the past year, and only 0.4% indicated they had gambled almost every day in the past year.

Summary

While slightly fewer college students participated in the 2007 Utah Higher Education Health Behavior Survey, analysis has shown that the data are representative of the state college population. In general, the survey results can be viewed as representing the student population that will be targeted for prevention programs. In addition, many campuses were able to reach their goals at the class level so that valid analyses could be provided for freshmen, sophomores, juniors, and seniors; as well as for the campus overall. These results produced information that can be used for prevention and treatment planning for Utah's college population. Overall, the rates of ATOD use for Utah students are much lower than for students nationally. For most substances, Utah students use at rates that are one-half to one-quarter the national rates.

Introduction

During the spring of 2007, the Utah Division of Substance Abuse and Mental Health (DSAMH) conducted the third administration of a statewide survey of college students called the Utah Higher Education Health Behavior Survey (College Survey). The first college survey was conducted in the spring of 2003 with 4,658 participants from the nine Utah public colleges (two colleges collected additional data in the spring of 2004, for a total of 6,336 surveys included in the 2003 data). The second survey was conducted in the spring of 2005 survey with 11,828 students attending the nine Utah public colleges and Westminster College. In 2007, the survey was completed by 10,186 students from nine public colleges. In order to compare the results of the 2007 survey to the 2005 and 2003 surveys. Only the results from the nine public colleges are presented in this report, including sections where data from the 2005 administration are presented. The participating public colleges include College of Eastern Utah (CEU), Dixie State College (Dixie), Salt Lake Community College (SLCC), Snow College (SNOW), Southern Utah University (SUU), University of Utah (UU), Utah State University (USU), Utah Valley State College (UVSC), and Weber State University (Weber).

Prior to the initial survey administration in 2003, an agreement was made between the DSAMH and the participating colleges that the results would be analyzed and reported for the entire state (all participating colleges combined), and that the individual colleges would receive the results for their colleges to distribute as they deemed appropriate.

The survey had several objectives: 1) assess the prevalence of alcohol, tobacco, and other drug (ATOD) use on Utah campuses, 2) measure the need for substance abuse treatment by college students, 3) gain information about health and safety issues facing college students, 4) measure students' perception of substance abuse prevention and policies on campus, and 5) measure the levels of selected risk factors for substance abuse.

Since 2003, the college population has been targeted for additional prevention services by the federal government as well as the Utah Department of Human Services. Information contained in this report can be used by college prevention planners to plan appropriate prevention services for 18 to 25 year-old students in Utah. In addition, the DSAMH has Federal Block Grant requirements to perform regular needs assessments for both treatment and prevention services. The results from this survey will help to fulfill the prevention requirements. Finally, the information can be used by local agencies to provide appropriate prevention services to the 18 to 25 year-old student population.

This report is divided into five sections. The first section, Survey Methods, describes how the survey The survey was conducted by was conducted, who participated, and procedures the Utah Department of that were used to ensure that valid information Human Services, Division of The second was collected. **Substance Abuse and Mental** Prevalence of Substance Use, presents the Health and use rates of ATODs for Utah college students. The third section, Risk and Protective Factors Bach Harrison, for Substance Abuse, provides a description of the Risk and Protective Factor Model of Substance Abuse Prevention, the risk factor scales measured in this survey, and the levels of risk. The fourth section, Treatment Needs, presents the results that asked about the need for substance abuse and mental health treatment. The fifth and final section presents Health and Safety Issues facing college students.

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Throughout the report, results from the 2007 College Survey will be compared to the 2005 and 2003 College Surveys as well as the national Monitoring the Future Survey, and students in grade 12 from the Utah 2007 Student Health and Risk Prevention (SHARP) survey. The results from the state and national surveys will provide a comparison for the 2007 Utah College Survey results.

Section 1: Survey Methods

Survey Questionnaire

The survey questionnaire was developed by a team of individuals representing Utah universities, Utah Department of Health, DSAMH, and a survey research firm (Bach Harrison, L.L.C.). In 2003, many of the questions were taken from the CORE Institute Alcohol and Drug Survey. For the 2005 and 2007 surveys, a number of the questions were updated to match the Utah Student Health and Risk Protection Survey (SHARP) that has been administered to students in grades 6 through 12 in Utah. Additional items for the survey came from Health Department questionnaires. A copy of the Utah College Survey is contained in Appendix A. The final questionnaire was designed to measure the following variables and constructs:

- 1) Student demographics
- 2) Alcohol, tobacco, and other drug (ATOD) use in respondents' life-time, past year, and 30 days prior to the survey
- 3) Perceptions of ATOD use by other students
- 4) Age of first use of ATODs
- 5) The risk factor scales of perceived availability of drugs, favorable attitudes toward drug use, perceived risk of ATOD use, rebelliousness (replacing the sensation seeking scale used in the 2003 survey), and depressive symptoms
- 6) Mental health
- 7) Body mass index
- 8) Problems with ATODs and need for treatment
- 9) Perceptions of campus policies and resources, and general attitudes related to ATOD use
- 10) Health issues such as exercise, diet, weight gain or loss, and sexual activity
- 11) Safety issues such as wearing a helmet while bicycle riding or seatbelt while riding in a car

Most of the survey questions have remained the same from 2003 to 2007. However, after each survey administration, revisions were made to update survey questions, remove questions that were not useful, and add questions for topics of new interest, such as energy drinks and gambling. Changes made from 2003 to 2005 can be found in the 2005 College Survey report. The following changes were made prior to administering the 2007 survey:

- 1) Questions were added on the following:
 - Sexual orientation
 - Disabilities
 - Gambling
 - Frequency of participation in school-sponsored activities
 - Likelihood of increased participation in campus activities if more were offered
 - Impact on participation in school-sponsored activities on alcohol or other drug use
 - Reasons for not participating in more school-sponsored activities
 - Suicidal ideation in the past 12 months
 - Suicide attempts in the past 12 months
 - How easy it is to get healthy food on campus
 - Past or current affiliation with Greek social fraternities or sororities
 - Participation in student government
- 2) The following questions were removed:
 - With whom do you live while attending school?
 - In the past 12 months has a doctor, nurse, or other health professional given you advice about your weight?
 - Current zip code and zip code in 12th grade
- 3) Lortab was added to the examples for heroin or other opiates.
- 4) Six fruit and vegetable questions were replaced with a single question.
- 5) Questions on physical activity levels were revised to assess moderate and vigorous activities.

All schools used the same survey form in 2007. An Internet version was made available to campuses which included the same questions as the paper form. In addition, schools had the option of an extra page that could be customized to meet the needs of a specific campus.

Survey Administration

Surveys were administered either online or on paper forms that could be scanned. A majority of the surveys in 2007 were administered online (59.3%) and the rest were administered in classrooms (40.7%). Several procedures were used to administer the surveys. The procedure used for paper surveys was to ask class instructors to administer the survey to the students in their classes. Instructors were given specific instructions and a script that they read to their students prior to administering the survey (see Appendix B). Paper surveys were used by CEU, DSC, SC, SUU and UVSC. The online procedure used by USU, SLCC, WSU, SUU and UU was to invite students to participate via the Internet. (SUU used both online and paper administrations of the 2007 College Survey.) The invitation for the Internet survey is also in Appendix B. Each procedure will be described below.

The paper questionnaires were primarily administered in large, randomly selected classes at each institution. At the beginning of class, the instructor handed out the survey booklets. Instructions were read that informed the students that participation in the survey was voluntary, the results completely confidential, and that once completed, their booklets would be placed in an envelope and sealed. Participants were further instructed not to place any identifying information on the survey such as name or social security number. Once the survey was completed, the envelopes were picked up by a representative at each institution and given to the survey contractor to scan and analyze.

Students completing the online survey were invited to participate by email. In all cases, the initial invitations were followed by reminder invitations. At two of the schools, in addition to email invitations, paper invitations were passed out in classrooms. In these cases, reminders were also passed out in classrooms. Students completing the online survey were given a password that could be used to log on to the Bach Harrison, L.L.C. web

site. Once logged on, they completed the survey by clicking on their answers to the survey questions. The online survey questions were identical to those on the printed survey. Once students completed the survey, they were instructed to click on a link to a second web address where they entered their name and contact information for an incentive drawing. There was no way that the two databases could be linked and thus the responses for each individual who completed the survey were completely confidential.

All campuses that did online surveying used an incentive drawing. The incentives varied across colleges. By soliciting donations from the community in addition to survey money allocated for incentives, USU was able to offer students the chance to win an iPod Video, 2 iPod Nanos, massages, free dinners, and more than 90 other prizes. SLCC offered students the chance to win \$250 in tuition assistance A majority of the or one of 30 free massages. WSU offered students surveys in 2007 were the chance to win a full tuition reimbursement administered online (59.3%) for Spring semester and four bookstore gift and the rest were administered certificates for \$250. UU offered four iPod in classrooms (40.7%) Shuffles. SUU offered an MP3 player.

Survey Sample, Completion Rate, and the Ability to Generalize Results

The College Survey was designed to provide valid results at the state level, the individual campus level, and the academic class level within each campus. Thus, the survey was designed to sample students from each college according to the population of the college and the number of students in each college class level (freshmen, sophomore, junior and senior). The sample sizes for each class level at each campus was chosen based on a ±5% margin of error at the 95% confidence level. Table 1 contains the number of students enrolled in each campus, the needed sample size for both campus-level and class-level analyses, and the actual number of surveys returned. A review of Table 1 shows that all of the nine colleges were able meet or exceed the number of surveys needed to have valid data at the campus level. Four of the nine campuses were able to get enough surveys to have valid data at the class level. A total of 10,186 surveys completed (including oversamples). This represents a slight decrease over the return rate of 2005, in which 11,812 surveys were return. However, it is still a large increase over 2003, in which 4,658 surveys were completed (an additional 1678 surveys were collected in 2004 at Weber and SLCC for a total of 6336 surveys).

Table 1: Participating Colleges and Universities											
		Mandad	C	2007 Returned Surveys**							
COLLEGE	2007	Needed Sample			ype	Total					
	Enrollment	Campus Level	Class Level	Paper	Online Over-samples		Returned Surveys				
CEU*	2,220	327	482	724		Athletes 32	756				
DIXIE	5,967	361	1,070	1,012			1,012				
SLCC	25,129	378	743		947		947				
SNOW*	4,179	352	590	751			751				
SUU	7,029	364	1,173	364	276	Athletes 147	787				
U of U	30,511	379	1,426		1,533		1,533				
						Athletes 78					
USU	23,623	378	1,366		1,202	Grad students 493	2,658				
						Extension 885					
UVSC	23,305	378	1,417	1,113							
Weber	18,642	376	1,403		629	629					
UTAH TOTAL***	140,605	3,295	9,670	3,964	4,587	1,635	10,186				

^{*} CEU and SNOW attempted to collect enough surveys to have valid data at two campuses each. The numbers reported here combine the two campuses for a single school number.

Response Rates

The response rates of the surveys are important because a low rate can introduce bias into the survey. If a low number of students return the surveys relative to the number of invitations extended, then it would be reasonable to be concerned that a certain type of student is more likely to return the survey. If this is the case, the survey is no longer randomly selected and may not be representative of the student body. Because the schools used different methods of data collection, the return rates are variable.

It was anticipated that the return rate would be approximately 70% for in-class surveys. In the past, it has been assumed that students will usually complete a survey if they are in class when it is administered, and missing students will generally be students who are absent from class that day. However, in the 2007 administration of the College Survey, campuses reported that in some cases, large numbers of students left class after hearing that a survey would be administered that day. It should also be noted that many campuses reported that professors seemed to be more unwilling to administer the survey this year than in years past. Campuses reported that professors indicated that they did not have time to spare an hour (often an entire class

period) on the survey and still cover all the material that needed to be covered for their courses. Also, some professors indicated that they had been asked to complete other surveys already in their classes. If an instructor of a randomly selected class refused to administer the survey, this number was not figured into the response rate. It was assumed that refusal to administer the survey represented characteristics of the instructor and not the class, and therefore, the students should be randomly distributed among these instructors. Except in extreme cases, as when an entire department declines to administer the survey, this should not affect the representativeness of the sample. However, it does make survey administration that much more difficult.

The return rates for in-class surveys are calculated by examining the number of students enrolled in each participating class and comparing it to the number of students who are absent or who decline to participate. Unfortunately, this method relies on the instructor of each class to write down the numbers of students enrolled, absent, and declining. After removing the classes that did not provide good information (i.e., no information was provided or the number of surveys returned did not equal the number of students enrolled minus the absent or non-participating students), the data indicated that 63.9% of students took the survey in class, with 22.9% absent and 13.2% declining to take the survey. This

^{**} Numbers in this table include all respondents including those that will be removed prior to analysis due to dishonest or inconsistent responses.

^{***} The Utah totals listed are the sums of the campus level and class level data for each campus. Considerably fewer respondents were needed to have valid data at the state level (383 for the state level across grades, and 1513 for valid state level data for each class level.)

response rate was quite a bit lower than the response rate in 2005. In 2005, 74.6% of students took the survey in class, with 18.8% absent and 6.6% declining to take the survey. Therefore twice as many students declined to take the survey in 2007 than 2005. This can have a potentially large impact on survey results if there is a particular type of student who is likely to decline to take the survey. (That is, declining to take the survey may not be randomly distributed among all the students.) It should also be noted that the response rates could only be calculated for a third (32.6%) of the total written surveys. The remaining surveys were either turned in without classroom information or the classroom information that was submitted was invalid.

The online surveys were anticipated to yield a 25% response rate, however in 2007 the response rate for undergraduates ranged from 5.6% confidentiality to 16.1%, despite multiple reminders of the survey was and attractive incentives. Due to low stressed through the return rates, campuses doing online instructions and surveys were encouraged to increase administration the number of their invitations beyond procedures. the original number sent out based on the anticipated 25% return rate. Although it was understood that increasing the numbers of invitations would not increase the return rate, it was decided that it would be preferable to have a higher number of respondents. Therefore, campuses were encouraged to send out a second round of invitations to recruit more students to participate in the survey.

The University of Utah sent email invitations and reminders to a total of 14,344 randomly selected undergraduate emails. Of these, 1533 students completed the survey. Therefore, the online response rate for the UU was 10.7%. Utah State University sent email invitations and reminders to a total of 7454 undergraduates, 2941 graduate students, and 4239 extension school students. USU students who responded consisted of 1202 undergrads (16.1% return rate), 493 graduate students (16.8% return rate), and 4239 extension school students (20.9% return rate). (USU Extension classes are non-credit classes taught throughout the state.) Salt Lake Community College sent email invitations and reminders to 14,280 randomly selected students. (Emails were only sent if the email account had been accessed within the past 30 days.) In addition, 100 SLCC professors were asked to pass out postcard invitations and reminders in their classes to approximately 2700 students. Although some professors may not have passed out the information, the total number of invitations either emailed or passed out by professors should

> be approximately 16,980. A total of 947 SLCC students completed the survey, yielding a response rate of 5.6%.

Southern Utah University used a combination of inclass and online surveys. For the online surveys, email invitations and reminders were sent to 2424 students and 276 students completed the survey online. Therefore, SUU had an online response rate of 11.4%. Weber State University sent email invitations and reminders to 6000 randomly selected students. One faculty member offered to send the invitation to 112 students in his online class, and 750 paper invitations were passed out in 12 randomly selected classes. Therefore a total of 6862 students were invited to participate, of which 629 completed surveys. WSU had a final response rate of 9.2%. For undergraduates at all of the five schools combined, 48,064 students were invited to participate in the online survey and 4587 students completed the survey. Therefore the total response rate for online surveys was 9.5%.

Callono Compus	Survey Pa	rticipation	Campus E	Inrollment	Mainhting Footos
College Campus	Number	Percent	Number	Percent	Weighting Factor
College of Eastern Utah	706	8.4	2,220	1.6	Price .18 / San Juan .09
Dixie State College	993	11.8	5,967	4.2	0.36
Salt Lake Community College	915	10.9	25,129	17.9	1.98
Snow College	728	8.7	4,179	3.0	Richfield .20 / Ephraim .28
Southern Utah University	630	7.5	7,029	5.0	0.73
University of Utah	1,512	18.0	30,511	21.7	1.11
Utah State University	1,190	14.2	23,623	16.8	0.81
Utah Valley State College	1,085	12.9	23,305	16.6	1.37
Weber State University	625	7.5	18,642	13.3	2.13
Total Utah College/University	8,384	100.0	140,605	100.0	

The

Note: Questionnaires of students who were dishonest or provided inconsistent responses have been removed from the above totals.

Data Weighting

As can be seen in Table 2 below, the each of the nine public colleges contributed between 7.5% and 18.0% of the total state surveys. However, the campus populations contribute between 1.6% and 21.7% of the total Utah college student population. These disproportionate numbers were necessary in order to get enough surveys at each school to draw conclusions at the class level. However, for the state-level analysis, it was important that small schools did not over-contribute to the final results or that the larger schools did not under-contribute. Therefore, in the state-level analyses, the data were weighted so that each school contributed the same proportion to the survey results as to the total college population. Weights for the 2007 data can be seen in Table 2. The oversamples were also not included in the state-level analysis to avoid over-representing those groups in the total analysis as well. (The oversamples were not randomly selected.)

Survey Participants

The characteristics of the students who completed the survey along with selected characteristics of the overall Utah student population are presented in Table 3. The number and percentage of respondents in each category are shown. Not including oversample students, there were a total of 167 (2.0%) surveys that were eliminated from analysis due to inconsistencies in

survey responses (see the validity section for a more complete description of the elimination criteria) leaving a total of 8384 surveys that were analyzed and shown in Table 3. College Survey data reported in Table 3 are *unweighted* in order to provide the demographics of the actual respondents. All other subsequent data tables are weighted according to the weights shown in Table 2.

The participants were divided nearly equally between males and females (male = 44.7% and females = 55.3%), however, males were slightly under-represented (state college enrollment is 50.6% male). The majority of respondents were White (87.8%) with the next largest groups being Hispanic (4.4%), American Indian (3.2%) and Asian (2.8%). These percentages roughly estimate the state enrollment with Whites slightly overrepresented. None of the ethnicities were under-represented relative to enrollment numbers, in part because respondents could mark as many ethnicities as applied, instead of being forced to choose just one. There was a large over-representation of fulltime students (78.9% on the survey compared to 51.9% in actual enrollment) and younger students (73.5% compared to 63.1%). However, the survey and prevention programs generally target younger, full-time students and results from this population are important. The survey was successful at recruiting students from other states and countries, with in-state students being slightly overrepresented. In general, the survey results can be viewed as representing the student population that will be targeted for prevention programs.

Table 3: Participant Characteristics Compared to Characteristics of Enrolled Students									
	UT Coll	ege Survey	State Colleg	e Enrollment*					
	Number	Percent	Number	Percent					
Total Honest	8,384	100.0	140,605	100.0					
Gender									
Male	3,684	44.7	71,098	50.6					
Female	4,552	55.3	68,576	48.8					
Class									
Freshmen and Sophomores	4,772	58.0	87,168	62.0					
Juniors and Seniors	3,065	37.3	41,190	29.3					
Graduate Degrees (Ph.D., M.A., M.S., etc.)	136	1.7	11,259	8.0					
Ethnicity									
American Indian/AK Native	275	3.2	1,514	1.1					
Hispanic	375	4.4	5,971	4.2					
Asian	238	2.8	3,478	2.5					
Pacific Islander	96	1.1	640	0.5					
White	7,528	87.8	110,642	78.7					
Black	58	0.7	1,197	0.9					

	UT Colle	UT College Survey		e Enrollment*
	Number	Percent	Number	Percent
Student Status				
Full-time	6,472	78.9	73,000	51.9
Part-time	1,728	21.1	67,605	48.1
Age	-			•
24 and Younger	5,973	73.5	88,766	63.1
25 and Older	2,156	26.5	51,471	36.6
Current Residence				•
On-campus	1,301	16.0		
Off-campus	6,837	84.0		
Permanent Residence				
In-state	7,482	89.2	101,549	72.2
USA, but other state	654	7.8	15,949	11.3
Country other than USA	121	1.4	3,589	2.6
Unknown/Unidentified	127	1.5	19,518	13.9
Relationship Status				•
Single	4,990	60.4		
Married	2,652	32.1		
Separated	46	0.6		
Divorced	273	3.3		
Widowed	21	0.3		
Cohabitating	278	3.4		
Currently Employed				
No	2,133	25.9		
Yes, full time	2,000	24.3		
Yes, part-time	4,095	49.8		
Religious Preference				
Catholic	293	3.6		
Jewish	16	0.2		
LDS	6,220	75.6		
Protestant	291	3.5		
Other	559	6.8		
No preference	848	10.3		

^{*} State College Enrollment data were found in the *Utah System of Higher Education 2007-2008 Data Book*.

^{** ---} Indicates an area where data could not be gathered or is not available.

Validity of the Data

In general, the completion rates for the 2007 College Survey were lower than expected, with an overall completion rate of 63.9% for in-class surveys and 9.5% for the online surveys. This can be compared to the 2005 return rate, which had an overall completion rate of 74.6% for in-class surveys and 28.3% for the online surveys. (In 2005, online completion rates were calculated without including SLCC. The 2007 completion rate after removing SLCC was 11.7%). Additionally, the fact that the demographics of the sample are representative of the overall college population, and almost all of the completed surveys were valid, makes these results a good estimate of characteristics of the Utah college population.

Because the two survey modalities (online and in-class) have very different response rates, a second validity check on the data was conducted to compare the paper surveys to the online surveys using the 2003 and 2005 data. Three campuses (SLCC, USU, and UU) used both online and classroom surveys in the 2003 and 2005 College Surveys. (The other campuses used only classroom surveys both years.) Therefore, to compare the modalities, only these campuses were used, to reduce variance associated with the other schools. Additionally, 2003 and 2005 data were merged as the year of administration was not fundamental to this comparison. This combination yielded 4,611 online surveys and 1,690 classroom surveys. An examination of this data indicated that the results from these two modalities were very similar. There were 1.6% dishonest online surveys and 0.5% dishonest classroom surveys. Women were slightly more likely to take the online survey, and freshmen and sophomores were slightly more likely to take the classroom survey. Otherwise, the demographics for the two modalities were strikingly similar. Reports of substance use were likewise very similar across the two modalities. Tables containing the comparison of the online and classroom surveys can be found in Appendix C of the 2005 report, available at http://www.hsdsa.utah.gov/docs/2005 higher_edu.pdf. A comparison between online and paper surveys was not conducted on the 2007 data because there was only one school that used a combination of online and in-class surveys. Therefore, a comparison of online and in-class surveys would also be a comparison of campuses, which can be quite different in Utah. Additionally, the schools that did online surveys tended to be larger, urban campuses, whereas the schools that did inclass surveys tended to be smaller, rural campuses. Therefore, a comparison of online to in-class surveys for the 2007 data would be misleading.

The information presented in this report is based entirely on the truthfulness, recall, and comprehension of the students who participated in the survey. Many studies have shown that most students are truthful in their responses to the questions on similar surveys. For example, the trends over time are very similar for ATOD use in the nation and states that repeat the survey every few years. Also, the changes reported by young adults parallel the changes during the same period in admissions to treatment for substance abuse. Finally, the relationships between different kinds of behaviors and the problems that students report are very consistent over a wide range of studies. As will be seen below, the results of the 2007 College Survey are very similar to the results of the 2003 and 2005 College Survey, which also indicates that the surveys provide valid estimates of student behavior.

This study was carefully designed to ensure honest responses from participants. The confidentiality of the survey was stressed through the instructions and administration procedures. Participants were assured that the survey was voluntary, anonymous, and confidential. They were told that no one would see their answers and that there was no way that a survey could be traced back to an individual student. Because the survey was anonymous, most of the reasons to exaggerate or deny behaviors were eliminated. However, several checks were built into the analysis to minimize the impact of students who were not truthful in their responses. Not including oversamples, there were 167 students (2.0%) who were eliminated because their answers were dishonest or inconsistent. Surveys were considered to be dishonest or inconsistent if any of the following criteria were met: 1) the respondent reported using a non-existent drug in the past 30 days, past year, or lifetime, 2) the respondent reported an impossibly high level of multiple drug use (more than 120 occasions in the past month), or 3) the respondent reported past 30 day use that was higher than past year use. Other measures to reduce response bias included selecting well-researched items (for most of the survey) that had been used successfully in other surveys, carefully pre-testing the questionnaire to ensure that students understood the meaning of each question, using a well developed and tested administration protocol, and reading the same instructions to all students who participated in the survey.

Section 2: Prevalence of Substance Use

Use of Alcohol, Tobacco, and Other Drugs (ATODs)

The results presented in this report are for students in the nine public Utah colleges who were deemed to be honest in their responses to the survey questions (not including oversamples). Several levels of analysis were conducted with the College Survey data. Comparisons were made between Utah college students and various population groups such as Utah students in grade 12, and college students who participated in a national survey. The national survey used for comparison was the University of Michigan survey called Monitoring the Future (MTF). The latest results from the MTF survey are from 2006. The 2005 National Survey on Drug Use and Health was also used to estimate national levels of need for alcohol and drug treatment as well as providing convergent evidence for levels of need for alcohol and drug treatment in Utah. In addition, 2003, 2005, and 2007 College Survey data are compared. The statistical test of proportions was conducted for many of the results to determine whether or not the differences between the 2005 Utah College results and other surveys were statistically significant. Because the sample sizes are so large, most differences larger than two or three percent were significant at the p < .05 level. However, the small size of the differences (effect size) makes some of the differences less meaningful. Small but significant differences become more meaningful if a pattern of change can be seen over time. Generally, a difference of five percent or more can be viewed as meaningful (however, with very low numbers,

smaller differences may be worth noting.) A complete list of survey questions and the number and percent of respondents who marked each choice can be seen in Appendix D.

The rates of ATOD use will be presented for lifetime use, use in the past year, and use in the 30 days prior to the survey (past 30 days). Lifetime use is a measure of the percentage of students who tried the particular substance at least once in their lifetime. For college students, early use may have been many years prior to the survey, but in this report the measure is included because it is generally a good indicator of the level of experimentation with a particular substance and knowledge of drug use. Use in the past year is much like lifetime use in that it can be use in the past; however, it captures more recent use and more importantly, use while the student was attending college. Use in the past 30 days is a measure of the percentage of students who used the substance at least once in the 30 days prior to taking the survey and is a more sensitive indication of the level of current use of the substance. Binge drinking, which will be presented in subsequent sections, is a measure of heavy use of alcohol.

Lifetime ATOD Use

Table 4 shows the percentages of college students who used the 16 categories of ATODs and "any drug" during their lifetime. The results are presented by males, females, and total because males and females typically have different use rates for many substances. Table 4 also contains the results of the 2003, 2005, and 2007 College Survey by gender and the 2006 MTF college survey for total substance use. As can be seen, the MTF results indicate that the national rates of substance use are much higher than those of Utah students, with the exception of methamphetamines. The national samples do not publish the rates for all of the substances measured by the Utah College Survey. Likewise, the way that some of the questions are asked on the Utah College Survey has changed over the years. For example, in 2007 methamphetamines were listed separately from other stimulants, whereas in 2005 they were combined. The symbol "---" is used to designate substance use rates where data are not available.

It should be noted that the numbers provided for the 2003 survey will not match the numbers provided in the 2003 College Survey Report. There are several reasons for this. First, in February of 2004, two campuses collected survey data. Weber State College had not collected data in February of 2003, and administered the 2003 College Survey for the first time in February 2004. Salt Lake Community College had administered the survey in 2003, but had such a low return (100) that they decided to re-administer the survey in 2004. Therefore, 853 surveys from Weber and 989 surveys from SLCC have been added to the 2003 survey results. In addition, because the data from the 2005 College Survey were weighted (as described above), in order to make the 2003 and 2005 data truly comparable, the data from the 2003 survey were weighted as well in the tables below. Finally, several of the substance use questions were changed from 2003 to 2005. Specifically, the 2003 and 2007 surveys asked respondents to indicate their level of amphetamine use and their level of methamphetamine use. In the 2005 survey, these were combined into a single question about stimulants. Similarly, in the 2003 survey, respondents were asked to indicate their level of use of GHB, rohypnol, and Ketamine. In 2005 and 2007 these questions were combined into a single question asking about use of "club drugs other than MDMA." In the 2003 data provided below, respondents were considered to have used "other club drugs" if they indicated they had used GHB, rohypnol, or Ketamine.

It is obvious from the results presented in Table 4 that Utah college students report having used most substances less in their lifetime than other students in the United States. Utah students have used alcohol and marijuana at just over one-half the rate of the national sample. Methamphetamines appear to be the exception, with this drug showing a slightly higher lifetime use rate than the national estimate. The substances most often used at least once by Utah students are alcohol (42.7%), cigarettes (28.9%), and marijuana (24.1%). The "any drug" category does not include the use of alcohol, tobacco, or smokeless tobacco. The lifetime rate for Utah students for any drug is just over half the lifetime rate for college students nationwide (28.6% in Utah compared to 50.6% nationwide.)

Males generally use substances at a higher rate than females. Alcohol is an exception to this rule, with more women (45.8%) reporting lifetime use than men (38.9%). The largest malefemale difference is chewing tobacco (male = 16.6%, female = 4.2%). Lifetime use rates of many of the substances increased from 2003 to 2005 and then decreased slightly in 2007. Tobacco, alcohol, marijuana, cocaine, sedatives, hallucinogens, and inhalants show this pattern. Exceptions are stimulants, which decreased dramatically from 2003 to 2005 and 2007. The data indicate that methamphetamine use was stable between 2003 and 2007 (no data is available for 2005) but non-methamphetamine use dropped during this time. Opiates showed a slight increase from 2003 to 2007. Ecstasy and other club drugs showed a slight decline over time. Any drug use was fairly stable with a slight decrease from 2005 to 2007.

Lifetime substance use by college class level is presented in Table 5. Unlike the 2003 data, these results do not indicate that freshmen have the highest lifetime use rate of ATODs while seniors have the lowest lifetime use rate. Instead, in 2007, lifetime substance use looks relatively uniform across the class levels.

Table 4: Lifetime Substance Use: Males, Females, and Total

Utah Survey Results Compared to National Monitoring the Future (MTF) Survey Results

	Lifetime Use										
		Males			Females			Total			
Substance	Utah 2003	Utah 2005	Utah 2007	Utah 2003	Utah 2005	Utah 2007	Utah 2003	Utah 2005	Utah 2007	MTF 2006	
Tobacco (Cigarettes or Smokeless Tobacco)	29.4	36.1	30.8	24.6	29.5	28.3	27.1	32.7	29.4		
Cigarette	27.3	33.7	29.5	24.0	29.1	28.2	25.7	31.4	28.9		
Chewing tobacco	17.1	19.6	16.6	3.0	4.8	4.2	9.9	11.6	9.8		
Alcohol	39.6	43.3	38.9	39.2	44.7	45.8	39.7	44.1	42.7	84.7	
Marijuana	25.6	28.1	24.5	22.3	24.7	23.6	24.0	26.4	24.1	46.9	
Cocaine	7.8	7.0	7.5	5.5	6.8	5.7	6.6	7.0	6.5	7.7	
Stimulants (Meth or Other)	10.5	6.3	7.1	15.2	5.7	6.3	13.0	6.0	6.6	10.7	
Methamphetamine**	5.2		4.8	3.7		4.2	4.4		4.4	2.9	
Non-Meth Stimulants	9.2		4.5	14.1		3.8	11.8		4.1		
Sedatives***	6.4	9.2	8.2	5.4	8.7	7.6	5.8	9.0	7.9	6.3/10.0	
Hallucinogens	9.3	10.0	9.1	7.1	7.7	6.6	8.0	8.8	7.8	10.6	
Heroin or other opiates****	3.6	5.8	6.7	1.2	4.0	3.9	2.3	4.9	5.1	0.7/14.6	
Inhalants	5.8	8.9	7.5	3.5	4.6	3.9	4.7	6.6	5.5	7.4	
DXM		4.7	4.2		2.3	1.9		3.4	2.9		
Ecstasy	6.2	5.1	4.3	5.5	4.6	4.1	5.7	4.8	4.2	6.9	
Other club drugs	3.3	2.2	1.5	1.4	1.8	1.3	2.3	2.0	1.4		
Any Drug	30.1	31.9	28.7	30.1	28.5	28.4	30.2	30.2	28.6	50.6	

^{* ---} Indicates an area where data could not be gathered or is not available.

^{**} In 2005, methamphetamines were included under stimulants. In 2003 and 2007, the category was separated into "Methamphetamines" and "Stimulants other than methamphetamines."

^{***}MTF Sedatives are reported as Sedatives/Tranquilizers

^{****}MTF Heroin Use is reported as Heroin/Other Narcotics

Table 5: 2007 Utah College Lifetime Substance Use: By Class Level									
		-	ne Use						
	Freshmen	Sophomore	Junior	Senior					
Tobacco (Cigarettes or Smokeless Tobacco)	27.1	30.4	28.4	29.9					
Cigarette	26.1	29.9	27.5	29.6					
Chewing tobacco	8.4	9.7	10.4	10.6					
Alcohol	38.9	42.8	41.2	44.6					
Marijuana	22.2	24.1	24.1	24.4					
Cocaine	6.3	6.9	6.8	5.4					
Stimulants (Meth or Other)	6.2	7.4	6.5	6.5					
Methamphetamine	4.4	4.7	4.2	4.0					
Non-Meth Stimulants	3.4	4.7	3.9	4.6					
Sedatives	7.1	7.8	7.6	8.5					
Hallucinogens	6.4	7.7	9.1	7.2					
Heroin or other opiates	4.6	5.1	5.7	5.2					
Inhalants	6.1	5.2	5.3	5.8					
DXM	3.0	3.0	2.7	3.3					
Ecstasy	4.0	4.2	4.7	3.8					
Other club drugs	1.2	1.5	1.5	1.0					
Any Drug	26.0	28.1	28.4	30.5					

Past Year ATOD Use

Reported ATOD use during the year prior to the survey is shown in Table 6. As with lifetime use, male and female use rates are shown for Utah data and the combined totals are shown for Utah and the national sample. Again, the national samples are quite similar and show that the ATOD past year use rate for the national sample is substantially higher than the Utah sample. For all drugs that have comparable national data from the Monitoring the Future survey, Utah has lower past year use rates. For all other drugs except sedatives, Utah use rates are lower relative to the national sample. Alcohol is the substance most used in the past year, with 29.9% of Utah students reporting use, as compared to 82.1% of the national sample. Marijuana is the next highest, with 7.8% of Utah students reporting use, as compared to 30.2% of the national sample.

Comparisons of 2007 to 2003 and 2005 past year use rates provide information about trends in use over time. Past year alcohol use rates have remained fairly constant, while past year marijuana use has decreased over time. Stimulant use decreased from 2003 to 2005, and then stayed constant from 2005 to 2007. This change appears to be driven by a change in non-methamphetamine stimulant use, as past year methamphetamine use rates have remained

constant. Sedative use rates have increased (although an outdated wording of the sedatives question in 2003 may have caused students to underreport usage of sedatives in that year.) Past year opiate use have increased over time. Past year any drug use appears to be on a slight downward trend from 2003 to 2007. Male and female ATOD use during the past year is quite similar, with the exception of alcohol, which was used significantly more by females in the past year.

Past year substance use by college class level is presented in Table 7. In 2003 and 2005, survey results indicated that freshmen had the highest use rate of many ATODs while seniors had the lowest past year use rate. In particular, in 2003, freshmen used most substances at a rate approximately twice that of seniors. In 2005, the differences between the classes were smaller, and in some cases, the classes appeared to use at very similar rates (for example, sedatives, hallucinogens, opiates, and ecstasy.) In 2007, only marijuana and ecstasy show a pattern of decreasing use with increasing class level. For alcohol, cocaine, sedatives, opiates, DXM, other club drugs, and any drug, use rates are very similar across the classes.

ı	Table 6: Past Year Substance Use: Males, Females, and Total
ı	Utah Survey Results Compared to National Monitoring the Future (MTF) Survey Results

Past Year Use								·		
Substance	Males		Females		Total					
Substance	Utah 2003	Utah 2005	Utah 2007	Utah 2003	Utah 2005	Utah 2007	Utah 2003	Utah 2005	Utah 2007	MTF 2006
Alcohol	26.2	28.2	25.0	28.6	32.2	33.9	27.8	30.4	29.9	82.1
Marijuana	11.3	10.0	8.3	9.3	8.3	7.2	10.2	9.1	7.8	30.2
Cocaine	2.3	2.0	1.8	1.2	1.7	1.3	1.8	1.8	1.6	5.1
Stimulants (Meth or Other)	4.0	2.0	2.3	6.3	1.6	1.5	5.2	1.8	1.9	6.0
Methamphetamine**	1.2		0.6	0.5		0.6	0.9		0.6	1.2
Non-Meth Stimulants	3.2		1.9	6.1		1.2	4.7		1.5	
Sedatives***	2.6	5.3	5.0	2.4	6.2	5.6	2.5	5.8	5.3	3.4/5.8
Hallucinogens	2.4	1.9	1.9	1.8	1.4	1.1	2.1	1.6	1.5	5.6
Heroin or other opiates****	0.7	2.7	4.1	0.2	1.7	2.9	0.5	2.2	3.4	0.3/8.8
Inhalants	0.7	0.9	0.9	0.3	0.6	0.5	0.5	0.8	0.7	1.5
DXM		0.9	1.0		0.8	0.5		0.8	0.7	
Ecstasy	1.8	1.4	1.6	2.1	1.6	1.4	1.9	1.5	1.5	2.6
Other club drugs	1.2	0.5	0.1	0.3	0.3	0.4	0.8	0.4	0.2	
Any Drug	15.0	14.3	13.4	15.3	13.7	13.4	15.5	14.0	13.4	33.9

^{* ---} Indicates an area where data could not be gathered or is not available.

^{**} In 2005, methamphetamines were included under stimulants. In 2003 and 2007, the category was separated into "Methamphetamines" and "Stimulants other than methamphetamines."

^{***}MTF Sedatives are reported as Sedatives/Tranquilizers

^{****}MTF Heroin Use is reported as Heroin/Other Narcotic

Table 7: 2007 Utah College Past Year Substance Use: By Class Level								
		Past Year Use						
	Freshmen	Sophomore	Junior	Senior				
Alcohol	29.3	30.4	27.1	29.7				
Marijuana	8.8	8.0	8.1	6.3				
Cocaine	1.7	1.7	1.9	0.9				
Stimulants (Meth or Other)	1.9	2.6	1.5	1.6				
Methamphetamine	0.5	1.0	0.5	0.3				
Non-Meth Stimulants	1.7	1.9	1.3	1.5				
Sedatives	5.1	5.7	4.8	5.8				
Hallucinogens	1.9	1.3	1.9	0.9				
Heroin or other opiates	3.6	3.3	3.6	3.4				
Inhalants	1.1	0.6	0.5	0.8				
DXM	0.7	0.7	0.6	0.9				
Ecstasy	2.0	1.5	1.5	0.8				
Other club drugs	0.3	0.3	0.2	0.2				
Any Drug	13.7	13.3	13.8	13.7				

Past Month ATOD Use

A review of Table 8 shows that current substance use by Utah college students (use in the 30 days prior to the survey) is again much lower than students nationally. Like use in the past year, Utah students have less than one-third the rate of use in the past 30 days for cigarettes, alcohol, marijuana, cocaine, stimulants, and hallucinogens as other students in the United States. Opiates, inhalants, and ecstasy have relatively higher use rates, but are still much lower than the national rate. One notable exception is sedatives, in which Utah students have the same or slightly higher use rates than the national sample. With the exception of alcohol, male 30-day use rates for nearly all substances are higher than, or approximately equal to, the rates for females.

Past 30 day use rates from 2003 to 2007 show a decreasing trend for tobacco, marijuana, cocaine, stimulants, and other club drugs. Overall drug use also appears to show a slight decrease over time. Sedative and opiate use appears to have gone up since 2003. In some cases, the differences across time are quite small.

A review of past 30-day use by class level indicates that use rates are fairly similar across the class levels, unlike in 2003, when freshmen reported greater 30-day use than seniors. In fact, in the 2007 sample, freshmen engaged in less past 30-day alcohol use than seniors. Past 30 day alcohol use appears to increase with class level. Otherwise, substance use appears to be very similar across the classes or have no discernible pattern. Past 30-day use rates by class level can be seen in Table 9.

Table 8: Past 30 Day Substance Use: Males, Females, and Total
Utah Survey Results Compared to National Monitoring the Future (MTF) Survey Results

		Lifetime Use								
Substance		Males			Females			Total		
Sunstance	Utah 2003	Utah 2005	Utah 2007	Utah 2003	Utah 2005	Utah 2007	Utah 2003	Utah 2005	Utah 2007	MTF 2006
Tobacco (Cigarettes or Smokeless Tobacco)	10.0	9.2	7.9	8.8	8.2	6.5	9.5	8.7	7.1	
Cigarette	8.5	7.5	6.4	8.6	8.1	6.5	8.6	7.9	6.4	19.2
Chewing tobacco	2.8	3.0	2.8	0.3	0.4	0.2	1.5	1.6	1.4	
Alcohol	19.5	21.9	18.7	20.6	22.2	24.6	20.4	22.1	21.9	65.4
Marijuana	6.7	5.4	4.4	4.1	3.8	3.5	5.4	4.6	3.9	16.7
Cocaine	0.9	0.5	0.5	0.6	0.5	0.4	0.7	0.5	0.4	1.8
Stimulants (Meth or Other)	2.4	0.7	0.8	3.0	0.5	0.5	2.7	0.6	0.7	2.5
Methamphetamine**	0.7		0.0	0.2		0.0	0.4		0.0	0.2
Non-Meth Stimulants	1.9		0.8	2.9		0.5	2.4		0.7	
Sedatives***	1.4	2.5	2.5	1.3	2.6	2.4	1.3	2.6	2.4	1.3/2.1
Hallucinogens	0.5	0.5	0.3	0.4	0.3	0.2	0.4	0.4	0.3	0.9
Heroin or other opiates****	0.4	1.3	1.6	0.2	0.7	1.1	0.3	1.0	1.3	0.2/3.1
Inhalants	0.2	0.2	0.3	0.1	0.2	0.2	0.2	0.2	0.2	0.4
DXM		0.2	0.3		0.1	0.0		0.2	0.2	
Ecstasy	0.7	0.4	0.4	0.2	0.4	0.4	0.4	0.4	0.4	0.6
Other club drugs	0.5	0.1	0.0	0.3	0.1	0.1	0.4	0.1	0.1	
Any Drug	9.5	8.0	7.4	8.3	6.8	6.9	9.0	7.4	7.2	19.2

^{* ---} Indicates an area where data could not be gathered or is not available.

^{**} In 2005, methamphetamines were included under stimulants. In 2003 and 2007, the category was separated into "Methamphetamines" and "Stimulants other than methamphetamines."

^{***}MTF Sedatives are reported as Sedatives/Tranquilizers

^{****}MTF Heroin Use is reported as Heroin/Other Narcotics

Table 9: 2007 Utah College Past 30 Day Substance Use: By Class Level							
	Past 30 Day Use						
	Freshmen	Sophomore	Junior	Senior			
Tobacco (Cigarettes or Smokeless Tobacco)	7.4	7.5	7.0	5.9			
Cigarette	6.7	7.0	6.0	5.3			
Chewing tobacco	1.6	1.2	1.5	1.1			
Alcohol	19.4	21.6	21.1	23.1			
Marijuana	4.5	4.0	4.4	3.0			
Cocaine	0.5	0.6	0.3	0.3			
Stimulants (Meth or Other)	0.8	0.8	0.4	0.9			
Methamphetamine	0.0	0.1	0.1	0.0			
Non-Meth Stimulants	0.8	0.8	0.3	0.9			
Sedatives	2.3	2.5	2.3	2.9			
Hallucinogens	0.3	0.1	0.4	0.2			
Heroin or other opiates	1.3	0.8	1.8	1.8			
Inhalants	0.4	0.2	0.3	0.1			
DXM	0.2	0.3	0.1	0.1			
Ecstasy	0.6	0.3	0.4	0.2			
Other club drugs	0.1	0.1	0.0	0.1			
Any Drug	7.4	6.8	7.7	7.6			

ATOD Use by Participant Characteristics

The use of ATODs varies between different campus groups. In previous sections of this report, gender and class level were discussed. In this section, ATOD use rates of other groups of students with given characteristics will be discussed. One area that was not discussed previously was binge drinking. Binge drinking is defined as drinking five or more drinks on one or more occasions in the two weeks prior to taking the survey. As can be seen in Table 10, males engaged in binge drinking slightly more than females in 2007 (males = 11.6%, females = 10.4%). This is a smaller difference than in 2005 when the gender difference was more pronounced (males = 14.0%, females = 9.7%). Meanwhile, significantly more female respondents engaged in past 30 day alcohol use than males. Part-time students binge drink more than full-time students (13.0% compared to 10.0%). While the results need to be interpreted with caution due to low numbers, the individuals that are most likely to engage in binge drinking are fraternity or sorority members with a rate of 48.4%, cohabitating students (31.0%), students from other countries (16.9%, which is quite a bit lower than the 2005 rate of 29.2%), non-LDS students, and students who rarely or never attend religious activities. While students from other countries tend to drink alcohol more than other students, they use less marijuana and other drugs than students from Utah. Students from other states tend to use drugs more than Utah students.

When students younger than 25 are compared to students 25 and older, it can be seen that older students are significantly more likely to have had alcohol in the past 30 days (all students in the older category can legally drink alcohol, so it is expected that there will be more drinking in the older group) but only slightly more likely to have engaged in binge drinking in the past two weeks. Older students were also more likely to have smoked cigarettes in the past 30 days, although this difference is smaller than the difference seen on the 2005 survey. (In 2007, 8.9% of older students smoked tobacco in the past 30 days, compared to 5.1% of younger students. In 2005, the numbers were 11.9% and 6.4%. Therefore smoking decreased among both older and younger students from 2005 to 2007.)

Perhaps the most consistent predictors of ATOD use among Utah college students are grade point average, attendance at religious services, and religious preference. The results in Table 10 reveal that use of ATODs decreases with increased grade point average and increased attendance at religious activities, and is very low for members of the LDS religion. Figures 1, 2, and 3 show the dramatic relationships between these variables and substance use

Table 10: ATOD Use by Participant Characteristics - Weighted Sample									
	Number of Participants in Category	Binge Drinking	Alcohol 30-Day	Cigarette 30-Day	Marijuana 30-Day	Any Drug 30-Day			
Total Percent	8,220	10.9	21.6	6.4	3.9	7.2			
Gender	.								
Male	3,740	11.6	18.7	6.4	4.4	7.4			
Female	4,480	10.4	24.6	6.5	3.5	6.9			
Academic Year	•								
Freshman	1,964	10.2	19.4	6.7	4.5	7.4			
Sophomore	2,291	11.3	21.6	7.0	4.0	6.8			
Junior	1,960	11.4	21.1	6.0	4.4	7.7			
Senior	1,517	9.8	23.1	5.3	3.0	7.6			
Age									
24 and Younger	5,408	10.4	19.1	5.1	4.1	6.9			
Older than 24	2,695	11.7	27.6	8.9	3.5	7.8			
Student Status									
Full-Time	5,898	10.0	18.9	5.6	3.8	6.9			
Part-Time	2,247	13.0	29.3	8.6	4.4	8.0			
Residency While In School	Residency While In School								
On-Campus	1,068	10.6	19.2	4.5	3.5	6.1			
Off-Campus	6,991	10.8	22.1	6.8	4.1	7.3			

Table 10: ATOD Use by Participant Characteristics - Weighted Sample, Cont.									
	Number of Partici- pants in Category	Binge Drinking	Alcohol 30-Day	Cigarette 30-Day	Marijuana 30-Day	Any Drug 30-Day			
Permanent Residence				•	•				
In-State	7,547	10.4	21.3	6.2	3.7	6.8			
Other U.S. State	557	15.3	27.1	7.7	7.6	12.1			
Country Other than USA	124	16.9	31.7	10.7	1.6	4.1			
Employment									
Not Employed	1,819	11.3	21.7	7.0	4.8	8.3			
Full-Time	2,540	13.5	28.5	8.4	3.7	7.9			
Part-Time	3,866	9.1	17.8	4.9	3.6	6.1			
Relationship Status									
Single	4,975	12.1	21.5	6.6	4.7	8.1			
Country other than USA	2,647	5.7	15.7	4.0	1.3	3.5			
Separated, Divorced, or Widowed	340	15.9	33.3	11.8	2.7	9.2			
Cohabitating	277	31.0	74.0	20.9	15.7	22.4			
Housing									
Houses or apartment	7,466	10.4	21.6	6.4	3.8	7.1			
Residence Hall	519	13.5	23.6	6.0	4.6	7.0			
Approved Housing	123	12.2	19.7	6.6	4.9	8.3			
Fraternity or Sorority	31	48.4	67.9	13.8	6.9	14.8			
Other	93	15.1	26.1	8.9	5.5	10.6			
GPA									
А	3,460	9.3	20.4	5.9	3.4	6.3			
В	3,899	11.1	22.1	6.0	4.1	7.3			
С	741	16.9	27.1	11.8	5.3	10.7			
D or F	42	14.3	23.8	7.1	7.1	12.2			
Religious Attendance									
Never Attend	1,126	35.3	67.0	21.4	13.9	21.2			
Rarely Attend	1,183	28.5	57.1	17.5	9.7	14.6			
1-2 Times a Month	636	13.4	30.6	6.0	4.7	10.8			
About Once a Week or More	5,291	1.5	3.4	0.9	0.4	2.1			
Religious Preference									
Catholic	318	33.3	65.6	18.6	6.4	11.0			
LDS	6,042	3.9	7.3	2.2	1.3	3.6			
Protestant	326	22.1	50.8	13.4	8.3	12.2			
Other	595	27.1	57.2	17.6	11.8	17.8			
No preference	944	33.7	67.3	20.2	13.0	19.8			

Figure 1

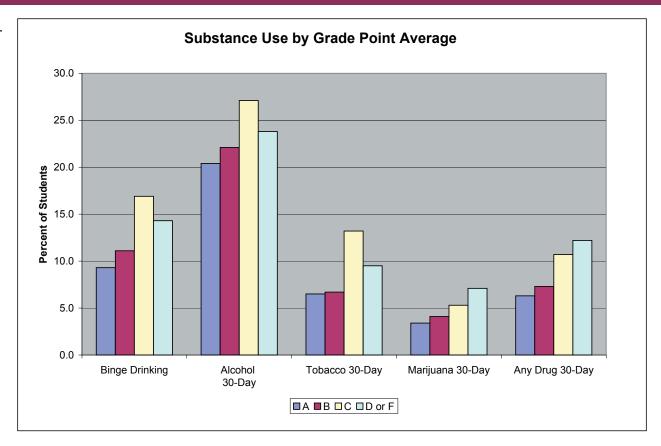


Figure 2

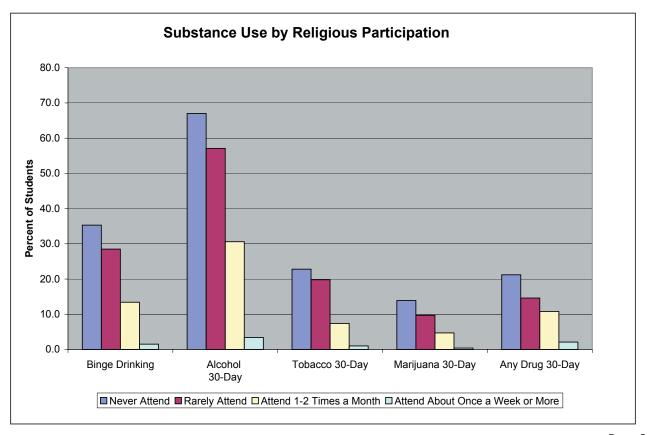
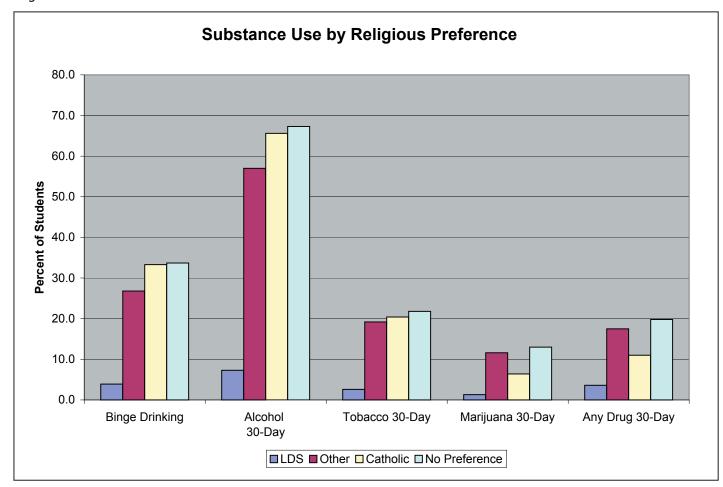


Figure 3



Section 3: Risk and Protective Factors for Substance Abuse

The Utah Division of Substance Abuse has adopted the Risk and Protective Factor Model of Substance Abuse Prevention to guide prevention work in Utah. The model is based upon the public health model that suggests that if the risks for a disease can be found then reducing the risks will reduce the incidence of the disease. In medical research, risk factors have been found for heart disease and other heath problems. Through media campaigns to inform the general public about the risk factors for heart disease, most people are now aware that certain behaviors (such as eating high fat diets, smoking, high cholesterol, being overweight, and lack of exercise) place them at risk for heart disease. Just as medical research discovered the risk factors for heart disease, social scientists have defined a set of risk factors that place young people at risk for the problem behaviors of substance abuse, delinquency, violence, teen pregnancy, and school dropout. They have also identified a set of protective factors that help to buffer the harmful effects of risk. Almost all of the work on the risk and protective factor model of prevention has been done with young people (18 years of age and younger). One of the goals of this survey is to determine the possibility of extending the risk and protective factor model of prevention to the college population.

Dr. J. David Hawkins, Dr. Richard F. Catalano, and their colleagues at the University of Washington have reviewed more than 30 years of existing work on risk factors from various fields and have completed extensive work of their own to identify risk factors for youth problem behaviors. They identified risk factors in important areas of daily life: 1) the **community**, 2) the family, 3) the school, and 4) within individuals themselves and their **peer** interactions. Many of the problem behaviors faced by youth -- delinquency, substance abuse, violence, school dropout, and teen pregnancy -- share common risk factors. Programs designed to reduce those common risk factors will have the benefit of reducing several problem behaviors.

For college students, the risk factors associated with these four domains are different than for younger students. For example, the community of college students is often the college campus, and the family of origin (mother and father) decreases in importance as college students begin to live more independently or start families of their own. Nearly a third (32.1%) of the respondents in this survey reported being married.

Risk factor scales that were deemed appropriate for college students by the survey design team were included in the survey and can be seen in Table 11. In Table 11, the scores of college freshmen, all college students who completed the survey, and Utah 12th grade high school students for the risk factors included in the survey are presented. Before the risk factors results are presented, a brief description of how the "percent at risk" value was calculated will be presented.

Percentage of Students At-risk Calculation

Before the percentage of students at risk on a given scale could be calculated, a scale value or cut-point needed to be determined that would separate the at-risk group from the not-at-risk group. The Prevention Needs Assessment (PNA) survey was designed to assess adolescent substance use, anti-social behavior, and the risk and protective factors that predict these adolescent problem behaviors. Since PNA surveys had been given to over 200,000 youth nationwide, it was possible to select two groups of students, one that was more at risk for problem behaviors and another group that was less at risk. A cut-point score was then determined for each risk and protective factor scale that best divided the students from the two groups into their appropriate group, more at-risk or less at-risk. The criteria for separating youth into the more at-risk and the less at-risk groups included academic grades (the more at-risk group received "D" and "F" grades, the less at-risk group received "A" and "B" grades), ATOD use (the more at-risk group had more regular use, the less at-risk group had no drug use and use of alcohol or tobacco on only a few occasions), and antisocial behavior (the more at-risk group had two or more serious delinquent acts in the past year, the less at-risk group had no serious delinquent acts).

The cut-points that were determined by analyzing the results of the more at-risk and less at-risk groups will remain constant and will be used to produce the profiles for future surveys in grades six through 12.

Since the cut-points for each scale will remain fixed, the percentage of youth above the cut-point on a scale (at-risk) will provide a method for evaluating the progress of prevention programs over time. For example, if the percentage of students at risk for availability of drugs in a community prior to implementing a community oriented policing effort to reduce the sale of drugs was 40% and then decreased to 30% one year after the program was implemented, the program would be viewed as helping to reduce the availability of drugs.

Risk Factors for College Students: Summary

In order to validate the risk factor approach with college students, the freshmen from the 2005 and 2007 College Surveys are compared to students in grade 12 from the 2007 Utah Student Health and Risk Prevention Survey (SHARP). Because not all high school seniors go on to college, the match between freshmen and 12th grade students would not be expected to be exact. Since the percent at risk score can go from zero to 100

percent, the values of freshmen are somewhat similar to those of 12th graders. Levels of risk for Utah college freshmen, Utah college undergraduates (including freshmen, sophomores, juniors, and seniors), and Utah 12th grade students can be seen in Table 11. The college freshmen tend to be more at risk than the high school seniors for attitudes favorable toward drug use, and high school seniors tend to be more at risk for perceived availability of drugs, depression and rebelliousness.

14.3

14.8

Table 11: Risk Factors for Freshmen, All College Students, and 12th Grade High School Students -Weighted Utah Data **Percent at Risk** 2007 2005 2007 2005 2007 **Risk Factors** Grade 12 College College College College **SHARP** Freshmen Freshmen Undergrad Undergrad Perceived availability of drugs scale 35.0 37.8 36.7 40.7 42.2 Attitudes favorable to drug use scale 20.8 28.6 26.6 31.3 31.9 Perceived risk of drug use scale 22.6 20.8 21.1 22.3 22.5 Rebelliousness scale 35.1 23.7 22.9 21.1 20.2

NOTE: The percentages of 2005 College Freshmen and 2005 College Undergraduates at risk due to attitudes favorable to drug use have been updated from the 2005 Utah Higher Education Health Behavior Survey Report to reflect new cut-points developed in 2007.

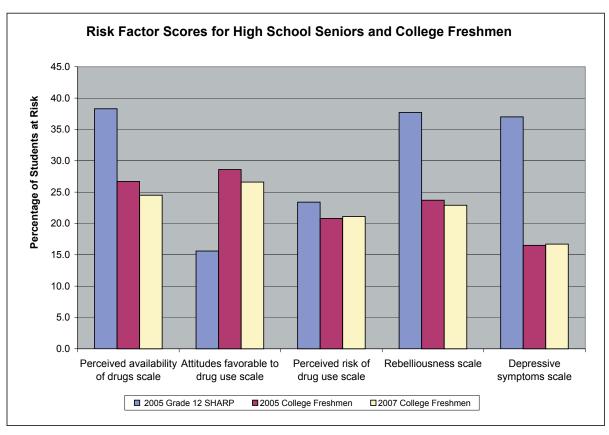
16.5

16.7

34.6

Figure 4

Depressive symptoms scale



Risk Factors for College Students: Depressive Symptoms

Table 12 compares the depressive symptoms for college freshman, all college students, and Utah high school youth in grade 12. Since the percentage of college students at risk on the depressive symptoms scale is approximately one-half that of 12th grade students, the four items of the depressive scale are presented in Table 12. The lower percentage for college students

is a result of their reporting a much higher rate of "definitely not true" and a much lower rate of "definitely true" to the four items. These differences between college students and $12^{\rm th}$ grade students held for all four items as well as for freshmen. Thus, it appears that high school students who choose to attend college do not report as high a rate of depressive symptoms as students who do not attend college.

Table 12: Depressive Symptoms for Freshmen Age 18-19, All College Students, and 12th Grade High School Students								
Depressive Symptoms Questions	2007 College Freshmen	2007 College Students	UT SHARP 2007 Grade 12					
Sometimes I think that life is not worth it.								
Definitely true	3.0	3.1	4.4					
Mostly true	5.5	4.9	18.7					
Mostly not true	25.1	23.3	25.8					
Definitely not true	66.5	68.8	51.1					
At times I think I am no good at all.								
Definitely true	4.1	3.7	5.8					
Mostly true	7.7	7.3	27.7					
Mostly not true	39.6	35.9	33.6					
Definitely not true	48.7	53.1	32.9					
All in all, I am inclined to think that I am a	failure.							
Definitely true	2.8	2.3	3.0					
Mostly true	5.7	5.3	11.4					
Mostly not true	22.4	25.4	34.3					
Definitely not true	69.1	67.0	51.3					
In the past year, have you felt depressed or sad MOST days, even if you felt OK sometimes?								
Definitely true	6.7	5.5	9.9					
Mostly true	13.0	10.6	22.5					
Mostly not true	28.4	28.8	32.8					
Definitely not true	51.9	55.2	34.8					

Risk Factors for College Students: Availability of Drugs

A review of the scale items for availability of drugs shows that age of students certainly has an effect on their responses. For example, older students rate alcohol as easier to get than freshmen and 12th grade students, while a greater percentage of 12th grade students rate marijuana as very easy to get (55.4% of 12th graders compared to 46.1% of college students).

Risk Factors for College Students: Age of Initiation

Knowledge of the age at which individuals begin to use ATOD is important in aiding prevention planning, as it allows prevention planners to target certain age groups before they are most likely to begin using substances. College students were asked to report when, if ever, they first used ATODs. In calculating the average age of initiation, only the ages indicated by students who had used the substance before were taken into account. As can be seen in Table 14, students begin using inhalants before using any other substance. Of the college students who had used inhalants, the average age of first use was 15.3 years. Age of initiation for alcohol and marijuana are approximately the same – 16.7 and 16.9 years respectively. Age of first use of DXM (drinking cough syrup to get high) also started at a simi-

larly young age of 16.6 years. Students who used other illegal drugs indicated that they began using them at approximately 17 to 19 years of age. The age of initiation for college students is higher than that of Utah high school seniors. On the 2007 SHARP survey, high school seniors report an average age of initiation for first sip of alcohol of 14.4 years, age of initiation for first regular use of alcohol (one or more times a month) of 15.5 years, and age of initiation for marijuana of 14.8 years. The college students have a later average of initiation of ATOD use by over three years. The earlier young people begin using ATODs the greater the likelihood that they will have problems with these behaviors later on. For example, research shows that young people who initiate drug use before age fifteen are at twice the risk of having drug problems as those who wait until after age nineteen.

Risk Factors for College Students: Questions

While these results tend to support the use of risk factors with college students, more work remains to be done. Some of the questions that need to be explored include the following: Are the cut-points developed for high school students appropriate for college students? In what areas can additional risk factor scales be developed? How well do risk factors predict the need for prevention services in a college population?

Table 13: Perceived Availability for Freshmen Age 18-19, All College Students, and 12th Grade High School Students						
Availability of Drugs Questions — Percentage of Respondents in Each Response Category	2007 College Freshmen	2007 College Students	UT 2007 Grade 12			
How hard to get alcohol						
Very Hard	15.8	7.2	14.8			
Sort of Hard	15.5	7.0	16.6			
Sort of Easy	29.0	16.0	27.6			
Very Easy	39.7	69.8	41.0			
How hard to get marijuana						
Very Hard	29.2	28.9	26.3			
Sort of Hard	23.7	24.9	18.3			
Sort of Easy	26.6	27.7	21.0			
Very Easy	20.5	18.4	34.4			
How hard to get some other drug						
Very Hard	44.6	46.6	38.3			
Sort of Hard	30.3	30.1	30.8			
Sort of Easy	18.3	16.2	19.1			
Very Easy	6.9	7.1	11.8			

Table 14: Age of First Drug Use (Of Those Who Have Used at Least Once in Their Lifetime) As Reported in the Higher Education Survey

	ic mgner L aabati		
	Age of Fire	st Use Higher Educat	ion Survey
	2003 Mean Age	2005 Mean Age	2007 Mean Age
Alcohol (more than a sip)	16.8	16.4	16.7
Marijuana	16.7	16.6	16.9
LSD or other psychedelics	17.1	17.2	17.7
Cocaine or crack	18.6	18.7	19.0
Inhalants	14.2	15.3	15.3
Methamphetamine	18.0	*	18.9
Stimulants other than meth	17.5	*	17.9
Sedatives	17.5	18.4	18.9
Heroin or other opiates	17.5	18.6	18.7
DXM (Cough syrup)	n/a	16.9	16.6
Ecstasy	19.1	19.0	19.5
Other Club Drugs	18.3	18.8	19.0

^{*}In 2005, age of first use for methamphetamines and other stimulants were combined. The age of first use for the combined stimulant category in 2005 was 17.7.

Secti<mark>on 4:</mark> Treatment Needs

The underlying assumption of this need for treatment analysis is that if an individual receives a diagnosis of substance dependence for any of the substances surveyed, that individual is assumed to need treatment. In order to estimate the need for substance abuse treatment, six questions (see Table 15) were included in the survey questionnaire that have shown a high correlation with the diagnosis of alcohol and drug dependence.

The questions have been used by the Arrestee Drug Abuse Monitoring Program (ADAM) to detect the need for substance abuse treatment. According to the **Methodology Guide for ADAM** published in May 2001, "Frequency of use alone is not

an accurate indicator of abuse or dependence; that is, lower levels of use can signal abuse or dependence and higher levels can be less problematic than they appear.... For this reason a clinically relevant measure of abuse and dependence was included in the new ADAM. Scores of 2 or more indicate problems at level of abuse of the substance (drugs or alcohol) and scores of 3 or more indicate problems at a level of dependence. The latter is generally used as an indication of need for treatment." The criteria for alcohol and drug dependence are detailed in the **Diagnostic and Statistical Manual of Mental Disorders IV** (**DSM-IV**) and are listed below for reference.

The Criteria for Psychoactive Substance Dependence

The DSM-IV criteria for Substance Dependence requires "A maladaptive pattern of substance use, leading to clinically significant impairment or distress as manifested by three (or more) of the following, occurring at any time in the same 12-month period:

- 1) tolerance, as defined by either of the following:
 - (a) a need for markedly increased amounts of the substance to achieve intoxication or desired effect
 - (b) markedly diminished effect with continued use of the same amount of the substance
- 2) withdrawal, as manifested by either of the following:
 - (a) the characteristic withdrawal symptoms for the substance
 - (b) the same (or closely related) substance is taken to relieve or avoid withdrawal symptoms
- 3) the substance is often taken in larger amounts or over a longer period than the person intended
- 4) there is a persistent desire or unsuccessful efforts to cut down or control substance use
- 5) a great deal of time spent in activities necessary to obtain the substance (e.g., visiting multiple doctors or driving long distances), use the substance (e.g., chain-smoking), or recover from its effects
- 6) important social, occupational, or recreational activities given up or reduced because of substance use
- 7) the substance use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by the substance (e.g., current cocaine use despite recognition of cocaine-induced depression, or continued drinking despite recognition that an ulcer was made worse by alcohol consumption)."

Need for Treatment Among Utah College Students

The questions that ask about problems related to alcohol and drugs are presented in Table 15 along with the percentage of students who reported each of the problem behaviors. Applying the criteria that students who answer yes to three or more of the items need treatment reveals that 6.3% of students need treatment for alcohol problems and 2.5% need treatment for drug problems, with a total of 7.3% of college students needing treatment for alcohol or drug problems. These results and the need for treatment by individuals 18 to 24 years of age in Utah from the Utah 2005 adult telephone Treatment Needs Survey and the National Survey on Drug Use and Health can be seen in Table 16.

Comparing the need for treatment by college students with the results from the Utah 2005 Treatment Needs Survey shows that college students need treatment at approximately the same rate as other individuals 18 to 24 years of age in Utah. The National Survey on Drug Use and Health estimates are somewhat higher than the Utah Survey Results.

Table 17 highlights the need for drug, alcohol, and mental health treatment by participant characteristics. As can be expected, group results here are similar to the results found in looking at substance use by group. Males and females have similar needs

for alcohol and drug treatment. Married students have the lowest need for alcohol or drug treatment compared to other marital status categories. Students with higher grade point averages have lower needs for alcohol and drug treatment than students with lower grade point averages. Students who attend religious activities more frequently need less alcohol or drug treatment than students who attend less, and LDS students need less alcohol treatment than students with other religious preferences.

By group, mental health treatment needs are very similar for categories within each group. While more women need mental health treatment than men, other factors such as age, year in school and housing do not appear to have much an impact on the need for treatment. However, grade point average is relevant, as Table 17 shows that the need for mental health treatment increases with decreased GPA (26.9% of 'A' students need treatment compared to 53.8% of 'D' or 'F' students). Further, students who are separated, divorced, or widowed indicated a high need for treatment, with 46.3% of these individuals needing mental health treatment.

	Yes -	Alcohol	Yes - Drugs	
Need for Treatment Symptoms - In the past 12 months, have	N*	%	N*	%
You spent more time using substance than you intended?	388	4.8	151	1.9
ou neglected responsibilities because of substance use?	361	4.5	150	1.9
ou wanted to cut down on substance use?	566	7.1	226	2.8
Anyone objected to your substance use?	493	6.1	195	2.4
ou frequently thought about using substances?	678	8.4	301	3.7
fou used substance to relieve bad feelings?	918	11.4	312	3.9

Table 16: Percentage Needing Treatment							
	Alcohol		Drugs		Alcohol or Drugs		
	N*	%	N*	%	N*	%	
Utah College Survey 2007	8308	6.3	8310	2.5	8308	7.3	
Utah College Survey 2005	9,997	9.1	9,835	4.1	9,827	10.9	
Utah College Survey 2003	4,163	6.9	4,094	3.8	4,050	8.4	
Utah 2005 Treatment Needs Phone Survey (18-24)	5,355	6.4	5,355	4.6	5,355	8.9	
2005 National Survey on Drug Use and Health (Utah 18-25) Dependence or Abuse		14.2		8.3		19.0	

^{*} In this table, N represents the number of respondents in the survey. The numbers may vary across the categories because respondents sometimes skip questions. For the Treatment Needs Phone Survey, N represents all adult respondents, not just the 18 to 24 group.

Table 17: Treatment Needs by Participant Characteristics							
	Number of Participants in Category	Need for Alcohol Treatment	Need for Drug Treatment	Need for Alcohol or Drug Treatment	Need for Mental Health Treatment		
Total Percent	8,384	6.3	2.5	7.3	29.4		
Gender							
Male	3,757	5.8	2.9	6.9	25.1		
Female	4,490	6.9	2.2	7.8	32.7		
Academic Year							
Freshman	1,972	7.1	3.2	8.0	31.5		
Sophomore	2,298	6.3	3.2	7.6	30.6		
Junior	1,962	6.0	2.0	7.0	27.6		
Senior	1,520	6.3	1.7	6.9	26.6		
Age	•						
24 and Younger	5,424	6.6	2.6	7.5	28.9		
25 and Older	2,704	6.0	2.5	7.3	30.7		
Marital Status	•						
Single	4,990	7.8	3.2	8.9	31.0		
Married	2,652	2.5	0.9	3.0	23.3		
Separated, Divorced, Widow	340	8.0	1.8	8.3	46.3		
Cohabitating	278	14.5	7.9	19.1	34.2		
Housing	•						
Houses/Apartments/etc.	7,481	6.2	2.5	7.2	29.3		
Residence Hall	519	7.2	2.5	8.0	29.7		
Approved Housing	123	4.9	2.4	6.5	29.0		
Fraternity or Sorority	31	19.4	3.2	22.6	30.8		
Other	93	12.1	3.3	14.3	32.0		

Table 17: Treatment Needs	Table 17: Treatment Needs by Participant Characteristics, Cont.							
	Number of Participants in Category	Need for Alcohol Treatment	Need for Drug Treatment	Need for Alcohol or Drug Treat- ment	Need for Mental Health Treat- ment			
Grade Point Average								
A	3,467	4.2	1.8	4.9	26.9			
В	3,904	7.0	2.6	8.1	29.4			
С	743	12.4	5.1	14.4	38.6			
D or F	42	19.5	2.4	19.5	53.8			
Religious Attendance	Religious Attendance							
Never Attend	1,129	16.7	7.1	19.3	39.2			
Rarely Attend	1,186	14.9	5.7	17.2	35.6			
Attend 1-2 Times a Month	637	8.5	3.8	10.2	38.3			
Attend Once a Week or More	5,300	2.0	0.7	2.3	24.6			
Religious Preference								
Catholic	318	13.6	1.9	13.7	33.2			
LDS	6,050	3.6	1.4	4.1	26.7			
Protestant	329	8.6	2.5	10.4	25.4			
Other	583	15.0	6.4	17.6	41.1			
No Preference	947	15.6	7.1	18.2	39.1			

Mental Health Scale

According to information published by the DSAMH, the Positive Mental Health Index (PMHI) is a sub-scale of the General Well-Being Schedule which focuses on symptoms and social functioning. In Utah, the PMHI has been used in statewide substance abuse need assessment studies to assist in identifying psychological distress and dysfunction. There are 10 items in the PMHI and each item has six responses that are scored 0 to 5 (scores range from 0 to 50). The 10 items can be reviewed on the College Survey in Appendix A, items 113 through 122. The instrument has good reliability (.87 to .97) and has been shown to discriminate between mental health clients and individuals from the normal population. General population norms have been developed for males and females as well as various age groups including 18 to 25.

The method of converting raw scores into a measure of mental health called the "Distress Level" can be seen in Table 18. The norms of the PMHI reflect the percentage of individuals in each of the five categories of raw scores. A review of Table 18 shows that for males aged 18-25, the normal population has 1.3% in the "Very High" range and an additional 13.1% in the "high" range while for females aged 18-25, 3.7% are in the very high range and 13.2% are in the High range. Scores in both the Very High and the High ranges are deemed clinically significant and indicate that treatment is indicated. The mental health treatment needs of respondents on the 2007 College Survey can be seen in Table 18. The results for college students show that more individuals have clinically significant scores than the general population (males 25.1% compared to 14.4%, females 32.8% compared to 16.9%). However, it should be noted that these norms are from 1996, and thus should be updated in order to serve as accurate norms for 2007.

Table 18: Measures of Mental Health								
	Percentage							
Distress Level	Raw Score	Utah College Male	Utah 18-25 Year Old Norm Male	Utah College Female	Utah 18-25 Year Old Norm Female			
Very High	0-20	6.9	1.3	9.3	3.7			
High	21-30	18.2	13.1	23.5	13.2			
Very High or High		25.1	14.4	32.8	16.9			
Moderate	31-36	19.5	13.5	22.6	21.9			
Mild	37-43	39.3	38.5	34.9	35.4			
Little or none	44-50	16.1	33.6	9.7	25.8			

Suicide and Mental Health

In the 2003 and 2005 College Survey, questions about suicide or suicidal ideation were asked only in terms of a consequence of drinking or drug use. In 2007, two additional questions were added to determine how many students had seriously considered suicide or actually attempted suicide in the past year. The survey results indicated that 10.7% of all students had seriously considered suicide in the past year, and 1.5% had attempted suicide in the past year.

The tables below compare the measure of mental health to past year thoughts of suicide (Table 19) and past year attempted suicide (Table 20). Students with very high levels of distress and high levels of distress were significantly more likely to have seriously considered suicide in the past year (47.9% of students with very high levels of distress, 21.4% of students with high levels of distress) and to have actually attempted suicide in the past year (8.6% of students with very high levels of distress, 2.6% of students with high levels of distress).

Table 19: Distress Level and Serious Thoughts of Suicide in the Past Year							
Distress Level	Never		One or more times		Total		
	N	%	N	%	N	%	
Very High	299	52.1	275	47.9	574	100.0	
High	1,170	78.6	318	21.4	1,488	100.0	
Moderate	1,371	91.8	122	8.2	1,493	100.0	
Mild	2,512	96.8	84	3.2	2,596	100.0	
Little or none	885	99.1	8	0.9	893	100.0	
Total	6,237	88.5	807	11.5	7,044	100.0	

Distress Level	Ne	Never		One or more times		Total	
	N	%	N	%	N	%	
Very High	522	91.4	49	8.6	571	100.0	
High	1,443	97.4	38	2.6	1,481	100.0	
Moderate	1,478	98.9	16	1.1	1,494	100.0	
Mild	2,585	99.5	12	0.5	2,597	100.0	
Little or none	893	100.0	0	0.0	893	100.0	
Total	6,921	98.4	115	1.6	7,036	100.0	

Section 5: Health and Safety Issues

Because smoking is related to many health problems, smoking prevention and treatment programs have been implemented at the state and national levels. Among youth there has been a reduction in rates of smoking over the past several years. In this survey, 8.6% in 2003 and 7.9% in 2005 and 6.4% in 2007 smoked during the past 30 days. This decrease represents a statistically significant difference. There was no decrease, however, in lifetime use rates of cigarettes, possibly indicating that regular use is decreasing while casual use is remaining stable. However, the number of individuals who smoke regularly is much less than indicated by the 30 day use rates. Only 3.3% report smoking regularly, and 4.0% report smoking at least one cigarette per day in the past 30 days. Thus, the number of every-day smokers is quite low on Utah campuses.

When smokers were asked if they had (in the past year) stopped smoking for a day or longer because they were trying to quit smoking, 41.3% reported "yes." The services that smokers would use to quit include: calling a quit line (25.4%), using a campus-based clinic or class (28.8%), counseling from a doctor or nurse (35.1%), self help materials (29.8%), or a free internet quit service (31.8%).

Other health and safety information gathered from the survey revealed that 7.0% of Utah students reported driving under the influence (DUI) of drugs or alcohol in the past year. (On the 2006 National College Health Assessment, 22.6% of students nationwide reported driving after drinking any alcohol at all in the past 30 days and 4.1% reported driving after having 5 or more drinks in the past 30 days.). In Utah, 91.2% of students reported wearing a seatbelt all of the time or most of the time when someone else was driving, and 91.9% reported wearing a seatbelt all or most of the time when they were driving. Nationwide, 94.9% of students reported wearing a seatbelt all or most of the time while riding in a car. Of the students who rode

bicycles in the past year, 58.0% never or rarely wore a helmet (compared to 53.9% of students nationwide). Only 6.7% of Utah students and 6.2% of students nationwide eat the recommended five servings of fruits and vegetables each day.

The survey questionnaire asked each student for his or her height and weight to use to calculate their body mass index (BMI). While not all students completed the height and weight questions, for those who did, the BMI was calculated and used to determine the relationship between BMI and exercise and dieting. Table 21 reports the percentage of college students by category who fit into the following BMI classifications: underweight, normal, overweight, and obese. Of all respondents who completed the height and weight questions, 5.9% were classified as underweight, 55.7% as normal, 24.8% as overweight, and 13.7% as obese. By participant characteristics, more males than females tend to be overweight (31.3% of males compared to 19.5% of females). Age and marital status also appear to be a factor, as more students over the age of 24 were classified as overweight or obese than students 24 and younger, and more married, cohabitating, separated, divorced, or widowed individuals were classified as overweight than single individuals.

Student health and dieting issues are reported in Table 22. Overall, a majority (72.0%) of students report that they eat at least five servings of fruits and vegetables two or more days per week, and a quarter (26.8%) report eating five servings at least four days per week. Just under half of the respondents (43.3%) indicated that it is somewhat or very hard to find healthy food options on campus. Approximately half of the respondents had eaten fewer calories or fat in the past 30 days in order to lose weight. Not surprisingly, respondents with higher Body Mass Index Classifications were more likely to have dieted to lose weight in the past 30 days.

Table 21: Body Mass Index Classifications by Participant Characteristics								
	Underweight	Normal	Overweight	Obese	Total			
Total Percent	5.9	55.7	24.8	13.7	100.0			
Gender								
Male	3.7	51.3	31.3	13.7	100.0			
Female	6.7	60.2	19.5	13.6	100.0			
Age	Age							
24 and Younger	6.2	64.2	20.9	8.7	100.0			
Older than 24	3.3	40.4	32.9	23.3	100.0			
Marital Status								
Single	6.1	61.1	21.6	11.2	100.0			
Married	4.2	48.2	30.2	17.5	100.0			
Separated, Divorced, or Widowed	4.7	42.1	31.6	21.6	100.0			
Cohabitating	2.7	57.1	28.6	11.6	100.0			

Table 22: Student Health an	d Dieting Issue	s by Body Mass	s Index Classific	cations	
How many days per week do you ea	at at least 5 serving	s of fruits and veg	etables?		
	Underweight	Normal	Overweight	Obese	Total
Rarely or never	27.6	26.9	28.2	33.1	28.1
2-3 days per week	45.1	45.3	45.1	44.9	45.2
4-6 days per week	19.5	20.5	21.2	16.2	20.1
Every day	7.8	7.3	5.5	5.9	6.7
How easy is it to get healthy food o	ptions on campus?)			
	Underweight	Normal	Overweight	Obese	Total
Very easy	16.5	14.5	14.1	14.0	14.4
Somewhat easy	47.5	42.3	42.2	39.9	42.2
Somewhat hard	22.8	33.1	31.4	33.8	32.2
Very hard	13.2	10.1	12.4	12.3	11.1
During the past 30 days, did you ea	t less food, fewer c	alories, or foods lo	w in fat to lose wei	ght?	
	Underweight	Normal	Overweight	Obese	Total
No	62.3	56.0	43.0	39.7	50.8
Yes	37.7	44.0	57.0	60.3	49.2
In a usual week, how many days do thing that causes small increases in	n breathing or hear	t rate.	· · · · · · · · · · · · · · · · · · ·		
	Underweight	Normal	Overweight	Obese	Total
O Days	7.7	3.1	5.1	8.3	4.5
1 Day	4.4	3.8	4.1	6.7	
2 Days	6.9				4.3
•	- 0.0	6.8	9.6	10.6	4.3 8.0
	12.9	6.8 12.7	9.6 14.4	10.6 16.7	
3 Days					8.0
3 Days 4 Days	12.9	12.7	14.4	16.7	8.0
3 Days 4 Days 5 Days	12.9 11.8	12.7	14.4 11.9	16.7 12.2	8.0 13.7 11.0
3 Days 4 Days 5 Days 6 Days 7 Days	12.9 11.8 20.8	12.7 10.2 19.8	14.4 11.9 19.7	16.7 12.2 18.2	8.0 13.7 11.0 19.6
3 Days 4 Days 5 Days 6 Days 7 Days In a usual week, how many days do	12.9 11.8 20.8 11.3 24.2 you do vigorous ac	12.7 10.2 19.8 18.3 25.4	14.4 11.9 19.7 15.2 20.1	16.7 12.2 18.2 9.8 17.5	8.0 13.7 11.0 19.6 16.0 22.9
3 Days 4 Days 5 Days 6 Days 7 Days In a usual week, how many days do	12.9 11.8 20.8 11.3 24.2 you do vigorous ac	12.7 10.2 19.8 18.3 25.4	14.4 11.9 19.7 15.2 20.1	16.7 12.2 18.2 9.8 17.5	8.0 13.7 11.0 19.6 16.0 22.9
B Days Days Days Days Days Days Days Days	12.9 11.8 20.8 11.3 24.2 you do <u>vigorous</u> acthing or heart rate.	12.7 10.2 19.8 18.3 25.4	14.4 11.9 19.7 15.2 20.1 t 10 minutes at a til	16.7 12.2 18.2 9.8 17.5	8.0 13.7 11.0 19.6 16.0 22.9
B Days Days Days Days Days Days Days Days	12.9 11.8 20.8 11.3 24.2 you do vigorous acthing or heart rate. Underweight	12.7 10.2 19.8 18.3 25.4 tivities for at least	14.4 11.9 19.7 15.2 20.1 t 10 minutes at a time	16.7 12.2 18.2 9.8 17.5 me? Vigorous is de	8.0 13.7 11.0 19.6 16.0 22.9 fined as anythin
B Days Days Days Days Days Days Days Days	12.9 11.8 20.8 11.3 24.2 you do vigorous acthing or heart rate. Underweight 24.6	12.7 10.2 19.8 18.3 25.4 tivities for at least	14.4 11.9 19.7 15.2 20.1 t 10 minutes at a till Overweight 18.0	16.7 12.2 18.2 9.8 17.5 me? Vigorous is de Obese 25.8	8.0 13.7 11.0 19.6 16.0 22.9 fined as anythin
B Days Days Days Days Days Days Days Days	12.9 11.8 20.8 11.3 24.2 you do vigorous acthing or heart rate. Underweight 24.6 15.6	12.7 10.2 19.8 18.3 25.4 tivities for at least Normal 13.4 11.9	14.4 11.9 19.7 15.2 20.1 t 10 minutes at a till Overweight 18.0 13.9	16.7 12.2 18.2 9.8 17.5 me? Vigorous is de Obese 25.8	8.0 13.7 11.0 19.6 16.0 22.9 fined as anythin Total 16.8 13.7
3 Days 4 Days 5 Days 6 Days 7 Days In a usual week, how many days do that causes large increases in breat 0 Days 1 Day 2 Days 3 Days	12.9 11.8 20.8 11.3 24.2 2 you do vigorous acthing or heart rate. Underweight 24.6 15.6 17.6	12.7 10.2 19.8 18.3 25.4 **tivities for at least Normal 13.4 11.9 18.6	14.4 11.9 19.7 15.2 20.1 t 10 minutes at a time Overweight 18.0 13.9 16.8	16.7 12.2 18.2 9.8 17.5 me? Vigorous is de Obese 25.8 20 18.7	8.0 13.7 11.0 19.6 16.0 22.9 fined as anythin Total 16.8 13.7 18.1
3 Days 4 Days 5 Days 6 Days 7 Days In a usual week, how many days do that causes large increases in breat D Days 1 Day 2 Days 3 Days 4 Days	12.9 11.8 20.8 11.3 24.2 you do vigorous acthing or heart rate. Underweight 24.6 15.6 17.6 14.3	12.7 10.2 19.8 18.3 25.4 tivities for at least Normal 13.4 11.9 18.6 22.2	14.4 11.9 19.7 15.2 20.1 10 minutes at a till Overweight 18.0 13.9 16.8 21.5	16.7 12.2 18.2 9.8 17.5 me? Vigorous is de Obese 25.8 20 18.7 16.4	8.0 13.7 11.0 19.6 16.0 22.9 fined as anythin Total 16.8 13.7 18.1 20.8
3 Days 4 Days 5 Days 6 Days	12.9 11.8 20.8 11.3 24.2 2 you do vigorous acthing or heart rate. Underweight 24.6 15.6 17.6 14.3 8.4	12.7 10.2 19.8 18.3 25.4 *tivities for at least Normal 13.4 11.9 18.6 22.2 12.8	14.4 11.9 19.7 15.2 20.1 t 10 minutes at a time Overweight 18.0 13.9 16.8 21.5 11.1	16.7 12.2 18.2 9.8 17.5 me? Vigorous is de Obese 25.8 20 18.7 16.4 7.7	8.0 13.7 11.0 19.6 16.0 22.9 fined as anythin Total 16.8 13.7 18.1 20.8 11.4

Section 6: Prevention Programs and Campus Policies

The College Survey contains several questions that inquire about campus ATOD prevention programs, campus policies, and student perceptions of ATOD use. Student perceptions of ATOD policies on campus are contained in Table 23. As can be seen, most students (68.5%) are aware that the campus has drug/alcohol policies and that campus personnel are concerned with drug/alcohol prevention (66.8%). However, over one-half (65.9%) do not know whether or not the campus has a

drug/alcohol prevention program. Most students do not believe that campus drug and alcohol policies are enforced or do not know whether they are enforced (67.7%). It is interesting that most students (74.6%) support stricter discipline for repeated campus drug/alcohol violations, however, only 47.1% believe other students on campus would support stricter discipline for repeated campus drug/alcohol violations. Over three quarters of students say they would support a policy to make their campus tobacco-free.

Table 23: Campus Drug and Alcohol Prevention Policies						
	% that said Y es					
	2003	2005	2007			
Does your campus have drug/alcohol policies?	71.2	70.4	68.5			
If so, are they enforced?	34.0	32.9	32.3			
Does your campus have a drug/alcohol prevention program?	36.3	36.0	34.1			
Do you believe your campus is concerned with drug/alcohol prevention?	67.5	66.2	66.8			
Are you involved with drug/alcohol prevention on your campus?	6.2	5.6	6.0			
Would you support a policy to make your campus tobacco-free?	N/A	74.1	76.0			
Do you support stricter discipline for repeated campus alcohol violations?	74.1	73.7	74.6			
Do you think other students support stricter discipline for repeated campus alcohol violations?	47.5	48.5	47.1			

Section 7: Perceived Substance Use

In order to determine student perception of ATOD use on campus, students were asked to indicate what percentage of students they believed had used each substance in the past year. Generally, students tend to overestimate ATOD use by their peers. For example, students perceived that 41.5% of students on campus used alcohol in the past year and 20.6% used marijuana in the past year. In fact, as shown in Table 24, only 29.9%

actually drank alcohol in the past year, and 7.8% actually used marijuana in the past year. These results still show that students overestimate ATOD use by their peers. Since the perception of ATOD use by others influences a student's choice to use ATODs, it is important that information about actual use rates of the various substances be made available to students on campus.

Table 24. Perceptions of Peer Substance Use and Actual Use Rates							
	2005	2005	2007	2007			
	Average % that students perceive used in past year	% Actual Past Year Use	Average % that students perceive used in past year	% Actual Past Year Use			
Tobacco*	28.2	13.0	26.6	12.7			
Alcohol	42.3	30.4	41.5	29.9			
Marijuana	21.9	9.1	20.6	7.8			
Illegal drugs not including marijuana	16.0	9.3	15.2	9.4			

^{*}Perceptions of past year peer tobacco use includes all tobacco products whereas past year use includes only cigarettes.

Section 8: Gambling

Questions on gambling were added to the 2007 College Survey. Approximately a third (32.7%) of Utah students had participated in some form of gambling in the past year. Slightly fewer students under age 21 had gambled in the past year than students who were over 21 (28.3% compared to 34.6%). Very few students had gambled on the internet (1.5%) regardless of whether they were of legal age. The most popular forms of gambling were gambling at a casino, playing cards for money, playing the

lottery, and betting on sporting events and games of personal skill. Very few students (2.0%) indicated that they gambled once a week or more in the past year, and only 0.4% indicated they had gambled almost every day in the past year. Table 25 shows the percentage of students under 21 and 21 or older who participated in each type of gambling in the past year.

Table 25. Student Gambling in the Past 12 Months					
	% of students who participated in this activity in the past year				
	Under 21	Total			
Gambled at a casino	4.2	20.7	15.6		
Played the lottery	6.3	10.2	9.0		
Bet on sporting events	7.7	7.5	7.5		
Played cards for money	12.8	12.7	12.8		
Bet money on horse races	0.7	0.5	0.6		
Played bingo for money or prizes	7.3	5.3	5.8		
Gambled on the internet	1.3	1.7	1.5		
Bet on dice games like craps	1.1	3.8	3.0		
Bet on games of personal skill (pool, darts)	9.2	6.3	7.2		
Bet on video poker	1.2	4.6	3.5		
Participated in any of the above types of gambling	28.3	34.6	32.7		

Appendix A: 2007 Utah Higher Education Health Behavior Survey

UTAH Higher Education Health Behavior Survey

The purpose of this survey is to learn about Utah college student health behaviors.

The survey is completely voluntary and anonymous and your responses will be kept confidential. DO NOT write your name or other identifying marks on this form. If you are younger than 18 DO NOT take this survey. This is not a test and there are no right or wrong answers.

Please answer the questions as honestly as you can. All of the questions should be answered by completely filling in one of the answer spaces. If you do not find an answer that fits exactly, use the one that comes closest. If any question does not apply to you, or you are not sure what it means, just leave it blank. You can skip any question that you do not wish to answer. The questionnaire will take approximately one 50 minute class period to complete.

If you do not wish to participate you will not be penalized, please just set the survey aside and check with your professor for an alternative activity. If you have questions or comments concerning the availability of substance abuse services, please contact your campus Alcohol & Drug Education Office.

Please mark only one answer for each question by completely filling in the circle with a #2 pencil.

1. Are you: Male Female	feet inches pounds
2. How old are you (If you're under age 18 DO NOT take the survey)? 2 2 3 3 4 4 5 5 6 6 7 7 7 8 8 8 6 9	9. What is your height (in 4) 10. What is your weight (in 10) 10 yeight (in 10) 10 y
What is your class level?	11. What is your place of permanent residence?
□ Freshman □ Grad/Professional	☐ In-state (Utah)
Sophomore✓ Not seeking a degree✓ JuniorCertificate Program	USA, but out of state
○ Senior ○ Other	Country other than USA
What is your major area of study?	12. What is your relationship status?
☐ Agriculture☐ Business☐ Education☐ Natural Resources☐ Sciences/Engineering☐ Social Services	Single □ Divorced
Fine Arts Trades/Technology Humanities Undecided	
Human Services/Health Professionals	Separated
Are you Hispanic or Latino?	Please indicate which of the following best describes your sexual orientation/identity:
Yes No	☐ Heterosexual ☐ Transgender
What is your race? Select one or more.	☐ Bisexual ☐ Unsure
Black or African AmericanAsian	Gay/Lesbian
American IndianAlaska NativeWhite	14. Have you been diagnosed with any of the following? (Please mark all that apply.)
Native Hawaiian or Other Pacific Islander	 Learning disability Mobility problems
What is your current student status?	Attention Deficit Disorder Chronic health conditions
Full-time (12+ credits)Part-time (1-11 credits)	 Deaf or hard of hearing Psychiatric conditions
	Blind or low vision that is not corrected with glasses
. What is your current resident status?	or contacts

PLEASE DO NOT WRITE IN THIS AREA

15. Where do you live while attendi	ng school?		Yes
	Fraternity or sororityOther	Don't know 27. Do you support stricter disciplinary	No O
16. Are you currently employed?		consequences for students who repeatedly violate campus alcohol policies?	
○ No ○ Yes, full-time	Yes, part-time	28. Do you think other students support	
17. What is your approximate cumu	lative grade point average?	stricter disciplinary consequences for students who repeatedly violate alcohol policies?	
	O D	ulocher penoleer	
○ A- ○ C ○ C ○ B+ ○ C-	○ D- ○ F	29. Think back over the last two weeks. How many tin you had five or more alcoholic drinks at a sitting	
B D+	ua corvince or activities?	○ None ○ 3 to 5 times	
18. How often do you attend religio	us services or activities?	Once 6 to 9 times	
NeverRarely1-2 Times a MonthAbout Once a Week or More		☐ Twice ☐ 10 or more times	_
19. What is your religious preference which you identify the most)?	e (choose the religion with	30. What is the average number of alcoholic drinks you consume in a week (if less than 10, code answers as	
Catholic		00, 01, 02, etc.)?)
Jewish		44 55)
LDS (Mormon)		(5) (5) (6) (6) (7) (7) (7)	
 Protestant (such as Baptists, F 	resbyterians, or Lutherans)	8 8 9 9	
Other			<u>기</u>
No preference			Ye
	Yes	I didn't smoke in the past 12 mont	No
	No	31. During the past year have you ever stopped	
20. Does your campus have alcohol and drug policies?	Don't know	smoking for a day or longer because you were trying to quit smoking?	
21. If so, are they enforced?		32. Would you consider using any of the following services to quit smoking:	
22. Does your campus have a drug			
and alcohol prevention program	1?	a. calling a quit line	00
23. Do you believe your campus is concerned about the prevention of drug and alcohol use?		b. a campus based stop smoking clinic or class	00
24. Are you actively involved in	000	c. one-on-one counseling from a doctor or nurse	
efforts to prevent drug and alcohol use problems on your campus?		d. self help material, books or videos	00
25. Would you support a policy to		e. free internet quit service	00
make your campus tobacco-free	»?	f. other (please specify)	00
26. Would you prefer to attend part	es where:	33. During the past 30 days:	
a. alcohol is available		a. how many ads or promotions for tobacco products seen on or near campus?	have yo
○ Yes ○ No ○	Doesn't matter	○ None ○ A few ○ A lot	
b. drugs are available Yes No	Doesn't matter	b. how many posters, newspaper articles, or other pr with anti-tobacco messages have you seen on or r	
		None A few A lot	

OCCASIONS

On how many occasions (if any) have you:											
On now many occasions (ii any) have you.		0	1-2	3-5	6-9	10-19	20-39	40+			
34. had alcoholic beverages (beer, wine or hard liquor) to drink in the past more than just a few sips?	year –	0	0	0	0	0	0	0			
35. had beer, wine or hard liquor to drink during the past 30 days?		0	0	0	0	0	0	0			
36. been drunk or very high from drinking alcoholic beverages during the p	ast 30 days?	0	0	0	0	0	0	0			
37. used marijuana (grass, pot) or hashish (hash, hash oil) in the past year	r?	0	0	0	0	0	0	0			
38. used marijuana (grass, pot) or hashish (hash, hash oil) during the past	30 days?	0	0	0	0	0	0	0			
39. used LSD or other psychedelics in the past year ?		0	0	0	0	0	0	0			
40. used LSD or other psychedelics during the past 30 days?		0	0	0	0	0	0	0			
41. used cocaine or crack in the past year ?		0	0	0	0	0	0	0			
42. used cocaine or crack during the past 30 days ?		0	0	0	0	0	0	0			
43. sniffed glue, breathed the contents of an aerosol spray can, or inhaled of sprays (nitrous or poppers), in order to get high in the past year ?	other gases or	0	0	0	0	0	0	0			
44. sniffed glue, breathed the contents of an aerosol spray can, or inhaled sprays (nitrous or poppers), in order to get high during the past 30 day		0	0	0	0	0	0	0			
45. used phenoxydine (pox, px, breeze) in the past year ?		0	0	0	0	0	0	0			
46. used phenoxydine (pox, px, breeze) during the past 30 days ?		0	0	0	0	0	0	0			
47. used methamphetamines (meth, speed, crank, crystal meth) in the pas	t year?	0	0	0	0	0	0	0			
48. used methamphetamines (meth, speed, crank, crystal meth) during the	past 30 days?	0	0	0	0	0	0	0			
49. used stimulants, other than methamphetamines (amphetamines, Rita without a doctor telling you to take them, in the past year?	lin, Dexedrine)	0	0	0	0	0	0 0				
50. used stimulants, other than methamphetamines (amphetamines, Rita without a doctor telling you to take them, during the past 30 days?	lin, Dexedrine)	0	0	0	0	0	0	0			
51. used sedatives (tranquilizers, such as valium or xanax, barbiturates, or without a doctor telling you to take them, in the past year?	sleeping pills)	0	0	0	0	0	0	0			
52. used sedatives (tranquilizers, such as valium or xanax, barbiturates, or without a doctor telling you to take them, during the past 30 days?	leeping pills)										
53. used heroin or other opiates (codeine, oxycontin, Lortab) without a doct them, in the past year ?	tor telling you to take	0	0	0	0	0	0	0			
54. used heroin or other opiates (codeine, oxycontin, Lortab) without a doct them, during the past 30 days ?	tor telling you to take	0	0	0	0	0	0	0			
55. used DXM (dextromethorphan, drinking cough syrup to get high) in the	past year?	0	0	0	0	0	0	0			
56. used DXM (dextromethorphan, drinking cough syrup to get high) during	g the past 30 days?	0	0	0	0	0	0	0			
57. used MDMA ('X', 'E', or ecstasy) in the past year ?		0	0	0	0	0	0	0			
58. used MDMA ('X', 'E', or ecstasy) during the past 30 days ?		0	0	0	0	0	0	0			
59. used club drugs other than MDMA (such as GHB, rohypnol, or ketamir	ne) in the past year ?	0	0	0	0	0	0	0			
60. used club drugs other than MDMA (such as GHB, rohypnol, or ketamin the past 30 days?	ne) during	0	0	0	0	0	0	0			
61. Have you ever used smokeless tobacco (chew, snuff, plug, dipping tobacco, or chewing tobacco)? Never Regularly in the past Once or Twice Regularly now	62. How often have you past 30 days? Not at all Once or twice Once or twice per			⊃ Thre	e to fiv		s per w	eek			
Once in a while but not regularly	63. Have you ever smok					-5 4	,				
Choo in a willo but not regularly	Never Once or Twice Once in a while b			⊃ Reg		in the pa	ast				

64. How frequently have you smoked cigarettes during the past 30 days? Not at all		70. How often have you experienced the following due to your drinking or drug use during the last year:		or 6 3-5 t	-9 1	time		35
Less than one cigarette per day One to five cigarettes per day About one-half pack per day			On Never	Twice	се			
About one pack per day About one and one-half packs per day		a. had a hangover		0	0	0	0	C
Two packs or more per day		 b. performed poorly on a test or important project 			0			
 During the last month, about how many marijuana ciga or the equivalent, did you smoke a day, on the average' (If you shared them with other people, count only the amount YOU smoked). 		c. been in trouble with police, residence hall, or other college authorities	C	0	0	0	0	
,		d. damaged property, pulled fire alarm, etc.			0	0	0	C
None↓ 4-6 a day↓ 7-10 a day↓ 1 a day↓ 11 or more a day		e. got into an argument or fight	C	0	0	0	0	C
2-3 a day		f. got nauseated or vomited			0	0	0	C
. Have you ever used prescription drugs to manage pain		g. driven a car while under the influence			0			C
in a way that was not originally intended by your docto (Mark all that apply))r f	h. missed a class			0	0	0	C
☐ I have used medication for a longer time period than		i. been criticized by someone I know	C	0	0	0	0	C
 originally intended by my doctor. I have used medication at a higher dosage than originally intended by my doctor. I have used pain medication for an unrelated injury, pair 		 j. thought I might have a drinking or other drug problem 	C	0	0	0	0	C
or problem.	11,	k. had a memory loss			0			C
☐ I have used someone else's prescription.☐ I use prescription drugs as prescribed.		I. done something I later regretted			0	0	0	C
7. Have you ever obtained prescription drugs for non-med	dical	m. been arrested for DWI/DUI		0	0	0	0	C
reasons, such as to get high, relax, improve mood, or socialize with friends; or to manage pain in a way that		n. have been taken advantage of sexually	C	0	0	0	0	C
was not originally intended by your doctor (for example for a longer time period, at a higher dose, or for an	θ,	o. have taken advantage of another sexually		0	0	0	0	C
unrelated injury)? (Mark all that apply)		p. tried unsuccessfully to stop using			0	0	0	C
I have obtained prescription drugs over the internet.I have lied to obtain prescription drugs.		q. seriously thought about suicide			0	0	0	C
I have had more than one doctor at the same time for the purpose of getting multiple prescriptions of the same dr	he rug.	r. seriously tried to commit suicide			0	0		
I have taken someone else's prescription.I obtain and use prescription drugs appropriately.		s. been hurt or injured		0	0	0	0	C
88. Students have different ideas of what OTHER students think or do. What do you think is the percentage of students at your school who, in the PAST YEAR:		71. Within the last year to what extent have you participated in any of the following activities? a. intercollegiate athletics		nor atte	ı-le nde	ade		on
TAGE FERM		b. intramural or club sports						
a. have used tobacco products?		- <u>'</u>						
b. have had alcohol (more than a sip)?		c. social fraternities or sororities d. religious and interfaith groups						
c. have used marijuana?		e. international and language groups			0		0	
d. have used an illegal drug		f. minority and ethnic organizations			0	0	0	
(not including marijuana)?		g. political and social action groups			0	0	0	C
e. have used prescription drugs for non-medical reasons?		h. music and other performing arts groups			0	0	0	C
		i. student newspaper, radio, TV, magazine, et	C.		0	0	0	C
9. Have any of your family had alcohol or other drug prob	olems:	j. volunteer time to help others			0	0	0	C
a. father No Yes b. mother No Yes		k. student government			0		0	
c. brother(s)/sister(s)						二		

à

72. How do you think your close friends feel (or would feel) about you:	Strongly disap Disappro Don't disapprove		ve	75. On this campus, is drinking a central part in the social life of the following groups:	No
about you.				a. male students	
a. trying marijuana once or twice				b. female students	
b. smoking marijuana occasionally	C			c. faculty/staff	C
c. smoking marijuana regularly	C		0	d. alumni	C
d. trying cocaine once or twice	C	0	0	e. athletes	C
e. taking cocaine regularly	C		0	f. fraternities	C
f. trying LSD once or twice	C	0	0	g. sororities	C
g. taking LSD regularly	C	0	0		
h. trying amphetamines once or twice	C	0	0	I do n	not i
i. taking amphetamines regularly	C		0	Decrea: About the same	sed
j. taking one or two drinks of an alcoh (beer, wine, liquor) nearly every day			0	Increased	,
k. taking four or five drinks nearly ever	y day		0	76. To what extent has your alcohol use changed within the last 12 months?	
I. having five or more drinks in one sit	ting	0	0	77. To what extent has your illegal drug use	
m. using tobacco regularly	C	0	0	changed within the last 12 months?	
n. taking steroids for body building or i athletic performance	mproved		0	78. To what extent do you agree with the following Strongly di	sag
following effects? a. breaks the ice	No			a. I feel valued as a person on this campus	
b. enhances social activity	C				
c. makes it easier to deal with stress	C			b. I feel that faculty and staff care about me as a student	
d. facilitates a connection with peers	C	0		c. I have a responsibility to contribute to the	50
e. gives people something to talk abou	ıt C	0		well-being of other students	
f. facilitates male bonding	C	0		d. my campus encourages me to help others in need	
g. facilitates female bonding	C			e. I abide by the university policy and	50
h. allows people to have more fun	C	0		regulations that concern alcohol and other drug use	
i. gives people something to do	C	0		f. drug and alcohol use are a normal part	50
j. makes food taste better	C			of college life	
k. makes women sexier	C				
I. makes men sexier	C	0		79. In the last month, have you provided or served alcohol to a person younger than age 21?	i
m. makes me sexier	C	0		○ Never	
n. facilitates sexual opportunities	C	0		Once of Twice	
74. Campus environment:				☐ Three or more times	
a. does the social atmosphere on this promote alcohol use?	campus				
b. does the social atmosphere promote drug use?	e other				

c. do you feel safe on this campus?

st	which of the following ways do other tudents' drinking interfere with your life n or around campus?	
a.	. interrupts your studying	
b.	. makes you feel unsafe	88. In the p
C.	messes up your physical living space (cleanliness, neatness, organization, etc.)	more tii you inte
d.	adversely affects your involvement on an athletic team or in other organized groups	89. In the p neglect respons
e.	prevents you from enjoying events (concerts, sports, social activities, etc.)	using a
f.	interferes in other way(s)	to cut d
g.	. doesn't interfere with my life	91. In the p objecte
	ow interesting are most of your courses to you? Our Very interesting and stimulating	92. In the p find you alcohol
	Quite interesting Fairly interesting Slightly interesting Very dull	93. In the p alcohol such as
as	ow often do you feel that the school work you are ssigned is meaningful and important? Never Often Seldom Almost Always Sometimes Always	94. How wr someor
	uring the past year, how did you usually get beer, wine, or ard liquor (select only one response)?	a. drir voo
	I did not drink beer, wine or hard liquor during the past year	at I
	I bought them in a liquor store	b. sm
	I gave someone else money to buy them for me	c. sm
	I had them at a party	d. use ille
	I had them at home	
	A person 21 years old or older gave them to me	95. How mi
	I took them from a family member	harming in other
	I got them some other way (Please Specify)	
		a. sm
	Very Easy Sort of Easy	b. try
	Sort of Hard Very Hard	c. sm
	you wanted to get some beer, wine or hard	d. tak (be
	quor (for example, vodka, whiskey or gin), ow easy would it be for you to get some?	e. tak
	you wanted to get some marijuana, how asy would it be for you to get some?	
LS	you wanted to get a drug like cocaine, SD, or amphetamines, how easy would be for you to get some?	
fo	you wanted to get some prescription drugs or non-medical reasons, how easy would it e for you to get some?	

		Alc	oho	ı			Drι	ıgs	
		Don'		se		D	on'		3
		Ye No	S			N	Ye lo	s	
moi	ne past 12 months, have you spent te time using alcohol or drugs than intended?	0	0	0			0	0	
neg res _l	ne past 12 months, have you lected some of your usual oonsibilities because of ng alcohol or drugs?	0	0	0			0	0	(
00. In the	ne past 12 months, have you wanted ut down on your alcohol or drug use?	0	0	0			0	0	
91. In ti obje	ne past 12 months, has anyone ected to your alcohol or drug use?	0	0	0			0	0	(
find	ne past 12 months, did you frequently yourself thinking about using shol or drugs?	0	0	0			0	0	
alco	ne past 12 months, did you use bhol or drugs to relieve feelings h as sadness, anger or boredom?	0	0	0			0	0	(
3011	neone your age to:	Ver	y W		ron ig	ıg			
			y W			ıg			
a.	drink beer, wine or hard liquor (for exan vodka, whiskey or gin) regularly, that is, at least once or twice a month?								
b.	smoke cigarettes?				0	\bigcirc	\bigcirc	0	
C.	smoke marijuana?				0	0	0	0	
d.	use LSD, cocaine, amphetamines or an illegal drug?	other			0	0	0	0	
har	v much do you think people risk ming themselves (physically or ther ways) if they:		_	ght	ate Ris			sk	
har	ming themselves (physically or		Slig	ght	ate Ris	Ris		k	
har in c	ming themselves (physically or ther ways) if they:		Slig	ght	ate Ris	Ris		k	
har in c	ming themselves (physically or ther ways) if they: smoke one or more packs of cigarettes		Slig	ght	ate Ris	Ris			
har in c a. b.	ming themselves (physically or ther ways) if they: smoke one or more packs of cigarettes try marijuana once or twice?	per da	Slig No ay?	ght	ate Ris	Ris			

	At what age did									2	6+	101. How often did you or your partner use a condom in the past year?
У	ou first use:							18-2	21- 20	25		Not sexually activeNeverNeverNeverNever
						14-	16- 15	17				Sometimes
					12-							
		Und Did not u	ler	10- 10	11							102. During the past month, did you eat less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight?
a	alcoholic beverages beer, wine or hard lice		0		0	0	0	0	0	0	C	○ No ○ Yes
b	o. marijuana (grass, po hashish (hash, hash	ot) or	0	0	0	0	0	0	0	0	C	Definitely Not True Mostly Not True Mostly True
c	LSD or other psyche	edelics	0	0	0	0	0	0	0	0		Definitely True
C	I. cocaine or crack		0	0	0	0	0	0	0	0	C	103. Sometimes I think that life is not worth it.
e	e. inhalants, sniffed glu		0	0	0	0	0	0	0	0	C	104. At times I think I am no good at all.
	the contents of an accan, or inhaled other sprays (nitrous or poorder to get high	r gases or										105. All in all, I am inclined to think that I am a failure.
f.	phenoxydine (pox, p	x, breeze)	0	0	0	0	0	0	0	0		106. In the past year, have you felt depressed or sad MOST days, even if you felt OK
g	j. methamphetamines speed, crank, crysta		0	0	0	0	0	0	0	0	C	sometimes?
h	n. stimulants, other tha methamphetamines (amphetamines, Ritali without a doctor telli take them	s in, Dexedrine)	0	0	0	0	0	0	0	0	С	Most of the time Sometimes Rarely Never
i.	sedatives (tranquilize valium or xanax, bar sleeping pills) withou telling you to take th	biturates, or ut a doctor	0	0	0	0	0	0	0	0	C	107. How often do you wear a seatbelt when riding in a car driven by someone else? 108. How often do you wear a seatbelt when
j.	heroin or other opiat oxycontin) without a telling you to take th	doctor	0	0	0	0	0	0	0	0	C	driving a car?
k	. DXM (dextromethorp		0	0	0	0	0	0	0	0	C	We are interested in 2 types of physical activity: vigorous and moderate. Moderate physical activity includes activities such as walking, bicycling, vacuuming, gardening, or anything else
- I.	MDMA ('X', 'E', or ed		0	0	0	0	0	0	0	0		that causes small increases in breathing or heart rate. Vigorous physical activity includes activities such as running, aerobics,
n	n. club drugs other tha (such as GHB, rohyr ketamine)		0	0	0	0	0	0	0	0		heavy yard work, or anything else that causes large increases in breathing or heart rate.
97. I	do the opposite of w	hat people to	ell ı	me,	jus	t to	ge	et th	nem	n m	ad.	109. In a usual week, how many days do you do moderate or vigorous activities for at least 10 minutes at a time?
	→ Very False	□ Sc	me	wha	at Ti	rue						Moderate Vigorous
	Somewhat False	○ Ve	ry 7	True								$\begin{array}{cccccccccccccccccccccccccccccccccccc$
	like to see how much		•									□ 2 □ 5 □ 2 □ 5
	○ Very False○ Somewhat False	◯ So ○ Ve				rue						110. On days when you do moderate or vigorous activities for at least 10 minutes at a time, how much total time per day do
99. I	ignore rules that get	in my way.										you spend doing those activities? Moderate Vigorous
	Very FalseSomewhat False	O Sc Ve				rue						hours: mins: hours: mins:
100.	How many different have you had in the (if less than 10, code as 00, 01, 02, etc.)?	past year	ers			12345678	4 5 6 7					0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

111. Do you usually wear a helmet when you do the following:	116. Have you felt so sad, discouraged, hopeless or had so many problems that you wondered if anything was
I do not participate in this activity	worthwhile during the past week or two?
Always Most of the time Sometimes Rarely Never a. ride a bicycle	Extremely so-to the point that I have just about given up Very much so Quite a bit Some-enough to bother me A little bit Not at all
b. snow / winter sports	447 11
c. water sports (kayaking, windsurfing, etc.)	117. How happy, satisfied, or pleased have you been with your personal life during the past week or two?
d. summer sports not including water sports (skating, rock climbing, etc.)	 Extremely happy-could not have been more satisfied or pleased Very happy
e. motorcycle / scooter riding	Fairly happy Satisfied, pleased Somewhat dissatisfied
112. During the past 12 months, how many times were you in a	Very dissatisfied
physical fight? O times O to 7 times	118. Have you been under or felt you were under any strain, stress, or pressure during the past week or two?
☐ 1 time ☐ 8 or 9 times	Yes, almost more than I could bear or stand
2 or 3 times 10 or 11 times	Yes, quite a bit of pressure Yes, some - more than usual
4 or 5 times 12 or more times	Yes, some - but about usual Yes, a little
113. How have you been feeling during the past week or two?	○ Not at all
In excellent spirits	119. Have you had any reason to wonder if you were losing
In very good spirits	control over the way you talk, think or feel during the past week or two?
In good spirits mostly	O Not at all
☐ I have been up and down in spirits a lot	Only a little Some, but not enough to be concerned or worried about
In low spirits mostly	Some, and I have been a little concerned Some, and I am quite concerned
In very low spirits	Yes, very much so and I am very concerned
114. Have you been bothered by nervousness or your nerves during the past week or two?	120. Have you been anxious, worried or upset during the past week or two?
 Extremely so-to the point where I could not work or take care of things 	 Extremely so, to the point of being sick, or almost sick Very much so Quite a bit
○ Very much so	Some, enough to bother me
Quite a bit	A little bit Not at all
Some - enough to bother me	101 Have you felt down because and blue down the control
	121. Have you felt down-hearted and blue during the past week or two?
O Not at all	All the time
115. Have you been in firm control of your behavior, thoughts, emotions, or feelings during the past week or two?	Most of the time A good bit of the time Some of the time A little of the time
Yes, definitely so	None of the time
Yes, for the most part	
Generally so	122. Have you been feeling emotionally stable and sure of yourself during the past week or two?
○ Not too well	☐ All the time
○ No, and I am somewhat disturbed	Most of the timeA good bit of the time
○ No, and I am very disturbed	Some of the time A little of the time None of the time

123. How many days per week do you eat at least five servings of fruits & vegetables (one serving=1 average piece of fruit, or 1 cup green leafy vegetables, or ¾ cup juice, or ½ cup dried fruit or vegetables, or ½ cup cooked vegetables)?	129. Please indicate the reasons you do not participate in more campus or school-sponsored social activities. (Please mark all that apply.)
Rarely or never	 I already participate in a lot of extracurricular activities on campus
2-3 days per week	I don't have enough time to participate
4-6 days per week	☐ It is too expensive to participate
Every day	☐ I am not aware of the activities or I find out too late
124. How easy is it to get healthy food options on campus?	☐ I have too many family obligations☐ I just don't want to participate
Very easy	I prefer other activities
Somewhat easy	The times that activities are offered are usually not
Somewhat hard	good for me
Very hard	 I don't like the people who participate in campus activities
125. Which of the following categories apply to you? Please do not include membership in professional, academic, or religious fraternities.	There are not enough activities offeredI'm usually not interested in the kinds of activities
 I currently belong to a social fraternity or sorority 	currently offered
☐ I formerly belonged to a social fraternity or sorority	130. Within the last 12 months, how many times have you seriously considered attempting suicide?
☐ I have never belonged to a social fraternity or sorority	○ Never ○ 7-8 times
☐ I am a little sister to a social fraternity	☐ 1-2 times ☐ 9-10 times ☐ 11 or more times
126. How often do you participate in campus or school-sponsored social activities?	☐ 5-6 times 131. Within the last 12 months, how many times have you
Very often	attempted suicide?
Quite often	○ Never ○ 7-8 times ○ 9-10 times
Infrequently	☐ 3-4 times ☐ 11 or more times ☐ 5-6 times
 Rarely or never 	132. These questions ask about gambling for money or
127. Would you participate in more campus or school-sponsored social activities if there were more options available?	possessions. During the past 12 months, how often have you:
 Definitely would 	Almost everyday Once a week or more
 Probably would 	Once a month A few times in the past year
Probably would not	Before, but not in the past year Never
 Definitely would not 	a. Gambled at a casino
128. Are you less likely to drink alcohol or use other drugs on nights that you participate in campus or school-sponsored social activities?	b. Played the lottery or lottery scratch-off tickets
I don't ever drink alcohol or use drugs	c. Bet on sporting events
I don't participate in campus or school-sponsored	d. Played cards for money
social activities	e. Bet money on horse races
I am much less likely to drink alcohol or use drugs	f. Played bingo for money or prizes
 I am somewhat less likely to drink alcohol or use drugs 	g. Gambled on the internet
 I am equally likely to drink alcohol or use drugs 	h. Bet on dice games such as craps
I am somewhat more likely to drink alcohol or use drugs	i. Bet on games of personal skill such as pool, darts, or bowling
 I am much more likely to drink alcohol or use drugs 	j. Bet on video poker

1/2

	а	b	С	d	е	f	g	h	i
133.	0	0	0	0	0	0	0	0	0
134.	0	0	0	0	0	0	0	0	0
135.	0	0	0	0	0	0	0	0	0
136.	0	0	0	0	0	0	0	0	\bigcirc
137.	0	0	0	0	0	0	0	0	0
138.	0	0	0	0	0	0	0	0	0
139.	0	0	0	0	0	0	0	0	\bigcirc
140.	0	0	0	0	0	0	0	0	0
141.	0	0	0	0	0	0	0	0	0
142.	0	0	0	0	0	0	0	0	\bigcirc
143.	0	0	0	0	0	0	0	0	0
144.	0	0	0	0	0	0	0	0	0
145.	0	0	0	0	0	0	0	0	0
146.	0	0	0	0	0	0	0	0	0
147.	0	0	0	0	0	0	0	0	0
148.	0	0	0	0	0	0	0	0	0
149.	0	0	0	0	0	0	0	0	0
150.	0	0	0	0	0	0	0	0	0
151.	0	0	0	0	0	0	0	0	0
152.	0	0	0	0	0	0	0	0	0
153.	0	0	0	0	0	0	0	0	0
154.	0	0	0	0	0	0	0	0	\bigcirc
155.	0	0	0	0	0	0	0	0	0
156.	0	0	0	0	0	0	0	0	0
157.	0	0	0	0	0	0	0	0	0
158.	0	0	0	0	0	0	0	0	0
159.	0	0	0	0	0	0	0	0	0
160.	0	0	0	0	0	0	0	0	0
161.	0	0	0	0	0	0	0	0	0
162.	0	0	0	0	0	0	0	0	0
163.	0	0	0	0	0	0	0	0	0
164.	0	0	0	0	0	0	0	0	0
165.	0	0	0	0	0	0	0	0	0
166.	0	0	0	0	0	0	0	0	0
167.	0	0	0	0	0	0	0	0	0
168.									\bigcirc

	а	b	С	d	е	f	g	h	i
169.	0	0	0	0	0	0	0	0	0
170.	0	0	0	0	0	0	0	0	0
171.	0	0	0	0	0	0	0	0	0
172.	0	0	0	0	0	0	0	0	0
173.	0	0	0	0	0	0	0	0	0
174.	0	0	0	0	0	0	0	0	0
175.	0	0	0	0	0	0	0	0	0
176.	0	0	0	0	0	0	0	0	0
177.	0	0	0	0	0	0	0	0	0
178.	0	0	0	0	0	0	0	0	0
179.	0	0	0	0	0	0	0	0	0
180.	0	0	0	0	0	0	0	0	0
181.	0	0	0	0	0	0	0	0	0
182.	0	0	0	0	0	0	0	0	0
183.	0	0	0	0	0	0	0	0	0
184.	0	0	0	0	0	0	0	0	0
185.	0	0	0	0	0	0	0	0	0
186.	0	0	0	0	0	0	0	0	0
187.	0	0	0	0	0	0	0	0	0
188.	0	0	0	0	0	0	0	0	0
189.	0	0	0	0	0	0	0	0	0
190.	0	0	0	0	0	0	0	0	0
191.	0	0	0	0	0	0	0	0	0
192.	0	0	0	0	0	0	0	0	0
193.	0	0	0	0	0	0	0	0	0
194.	0	0	0	0	0	0	0	0	0
195.	0	0	0	0	0	0	0	0	0
196.	0	0	0	0	0	0	0	0	0
197.	0	0	0	0	0	0	0	0	0
198.	0	0	0	0	0	0	0	0	0
199.	0	0	0	0	0	0	0	0	0
200.	0	0	0	0	0	0	0	0	0
201.	0	0	0	0	0	0	0	0	0
202.	0	0	0	0	0	0	0	0	0
	\vdash								
203.	\bigcirc	\bigcirc	$ \mathcal{O} $	\cup	\cup	$ \cup $	$ \cup $	$ \mathcal{O} $	$ \cup $

Appendix B: Survey Administration Materials: Online Student Invitations to Participate, Teacher Survey Administration Instructions, Class Administration Instructions and Script

MEMORANDUM

TO: [INSERT PROFESSOR'S NAME]

FROM: [INSERT ALCOHOL & DRUG EDUCATION COORDINATOR INFO]

DATE: [INSERT DATE]

RE: Utah Higher Education Health Behavior Survey

Your class has been randomly chosen to participate in the Utah Higher Education Health Behavior Survey. I am asking your cooperation in administering the survey. This survey is being given to students at all of the Utah state colleges. The survey will be asking students questions about alcohol, tobacco, and other drug use, school, their peers, and health related behaviors. The information will then be used for planning prevention services on our campus.

The survey will take approximately 45 minutes to complete. We need to complete [INSERT NUMBER] surveys on our campus and will be trying to collect the data during a two week period in February. Please let me know if you'll be willing to administer the survey to students in [SECTION #, TIME, DAY OF CLASS] during the weeks of [DATES]. If you agree I will be getting you more detailed instructions along with the survey instrument.

I hope we can count on your support. Please contact me at [PHONE] or [EMAIL ADDRESS].

STUDENT ON-LINE INVITATION TO PARTICIPATE

You have been selected from a random sample of students to participate in the <u>Utah Higher Education Health Behavior Survey</u>. The purpose of this survey is to learn what students at Utah colleges think about alcohol, tobacco, and other drug use, school, their peers, and health related behaviors. The information gathered will be used for planning prevention services on campus.

The survey is anonymous and voluntary. If you do not wish to participate feel free to refuse. If you wish to accept this invitation you may either take the survey on-line or at the Student Testing Center during [INSERT DATES].

To take the survey on-line, go to [INSERT ADDRESS].

ID: [INSERT ID]

Password: [INSERT PASSWORD]

After logging in, you will receive detailed instructions. The survey itself will be self-explanatory. In appreciation of your participation, upon completion of the survey, you may enter an "opportunity drawing" for [INSERT DETAILS OF YOUR DRAWING – PRIZE AND NUMBER AWARDED, ETC.]. After 2 weeks, students who have not filled out the information for the opportunity drawing will be sent a reminder to complete the survey. However, there will be no way to link your survey responses to your contact information. Please be assured that your survey responses are anonymous.

Thank you for taking the time to consider participating in this survey. We again want to stress that the information is anonymous and that this is strictly a voluntary survey.

Utah Higher Education Health Behavior Survey (UHEHBS) Instructor Guide (No Drawing)

Prior to Class:

- 1. Make certain that you have enough survey booklets for all of the students in your class, and remember that only students 18 years of age and older can take this survey.
- 2. Make sure you have enough drawing entries for the entire class.
- 3. Please verify that your class seating is arranged so that others cannot see a student's answers to the survey questions.
- 4. The student survey will last an **entire class period (45 minutes)**. Please reserve the whole class period on the selected date so that your students have time to finish the survey without feeling rushed.

During Class:

- 1. A verbatim script, called "Class Administration Instructions," is included with this package. These instructions must be carefully and clearly read to your students at the beginning of the class period.
- 2. Please remain at the front of the classroom while students are completing the survey. It is important that the students feel comfortable that no one will see their answers.
- 3. It is important that students use the pencils provided (No. 2) because the surveys will be scanned to retrieve the data.
- 4. Write on the board: For further questions or information contact Utah State Dept. of Human Services: Connie Kitchens at 801-538-3939 or Mary Caputo 538-4295. Or the Campus Office of Alcohol & Drug Education [INSERT CONTACT'S NAME AND NUMBER].
- 5. At the end of class, pass around the large envelope and ask students to place their completed surveys inside. Monitor this process to ensure that students **do not** take any surveys out of the envelope as it goes around the room. Instruct the last person in class to seal the envelope before returning it to you.
- 6. Before returning the completed surveys, fill out the information on the envelope label. *This information is very important to ensure the validity of the data.*

After Class:

1. Please return the envelopes containing all of your **used** survey materials to your school's survey coordinator at the end of the class period **OR** work with your survey coordinator to arrange another means of transferring the packet. It is important that these materials are stored in a safe location to protect the students.

Utah Higher Education Health Behavior Survey (UHEHBS) Instructor Guide (With Drawing)

Prior to Class:

- 1. Make certain that you have enough survey booklets for all of the students in your class, and remember that only students 18 years of age and older can take this survey.
- 2. Make sure you have enough drawing entries for the entire class.
- 3. Please verify that your class seating is arranged so that others cannot see a student's answers to the survey questions.
- 4. The student survey will last an **entire class period (45 minutes)**. Please reserve the whole class period on the selected date so that your students have time to finish the survey without feeling rushed.

During Class:

- 1. A verbatim script, called "Class Administration Instructions," is included with this package. These instructions must be carefully and clearly read to your students at the beginning of the class period.
- 2. Please remain at the front of the classroom while students are completing the survey. It is important that the students feel comfortable that no one will see their answers.
- 3. It is important that students use the pencils provided (No. 2) because the surveys will be scanned to retrieve the data.
- 4. Write on the board: For further questions or information contact Utah State Dept. of Human Services: Connie Kitchens at 801-538-3939 or Mary Caputo 538-4295. Or the Campus Office of Alcohol & Drug Education [INSERT CONTACT'S NAME AND NUMBER].
- 5. At the end of class, pass around the large envelope and ask students to place their completed surveys inside. Monitor this process to ensure that students **do not** take any surveys out of the envelope as it goes around the room. Instruct the last person in class to seal the envelope before returning it to you. Also, instruct the students to fill out the entry form if they wish to participate in the "opportunity drawing" for their participation.
- 6. Before returning the completed surveys, fill out the information on the envelope label. *This information is very important to ensure the validity of the data.*

After Class:

1. Please return the envelopes containing all of your **used** survey materials to your school's survey coordinator at the end of the class period **OR** work with your survey coordinator to arrange another means of transferring the packet. It is important that these materials are stored in a safe location to protect the students.

Utah Higher Education Health Behavior Survey "Opportunity Drawing"

Please fill out your preferred method of contact. This information will be used only for the drawing and will not be linked in any way to your survey responses. Please be assured that your survey responses are anonymous.

Address

responses are anonymous.	responses are anonymous.
Name	Name
Phone	Phone
Address	Address
Utah Higher Education Health Behavior Survey "Opportunity Drawing"	Utah Higher Education Health Behavior Survey "Opportunity Drawing"
Please fill out your preferred method of contact. This information will be used only for the drawing and will not be linked in any way to your survey responses. Please be assured that your survey responses are anonymous.	Please fill out your preferred method of contact. This information will be used only for the drawing and will not be linked in any way to your survey responses. Please be assured that your survey responses are anonymous.
Name	Name
Phone	Phone
Address	Address
Utah Higher Education Health Behavior Survey "Opportunity Drawing"	Utah Higher Education Health Behavior Survey "Opportunity Drawing"
Please fill out your preferred method of contact. This information will be used only for the drawing and will not be linked in any way to your survey responses. Please be assured that your survey responses are anonymous.	Please fill out your preferred method of contact. This information will be used only for the drawing and will not be linked in any way to your survey responses. Please be assured that your survey responses are anonymous.
Name	Name
Phone	Phone_

Utah Higher Education Health Behavior Survey

Please fill out your preferred method of contact. This

information will be used only for the drawing and

will not be linked in any way to your survey

responses. Please be assured that your survey

Address

"Opportunity Drawing"

CLASS SCRIPT - NO DRAWING

[READ TO THE CLASS:] Today, we will be completing the <u>Utah Higher Education Health Behavior Survey</u>. The purpose of this survey is to learn what students in Utah colleges think about alcohol, tobacco, and other drug use, school, their peers, and health related behaviors. This information will be used for planning prevention services on campus.

The survey is **anonymous**. The survey does not ask for your name or any other identifying information, so no one will know how you answer any of the questions. You should read each question on the survey and fill in the circle for your answer. **If there are any questions that you do not wish to answer for any reason, you do not have to answer them. Simply leave them blank.**

At the end of class, I will pass around an envelope and ask you to place your completed survey booklet inside. The last person in class will seal this envelope before returning it to me.

The survey is voluntary. If you do not wish to participate in the survey, please just set the survey aside and [SUGGEST AN ALTERNATE ACTIVITY SUCH AS READING QUIETLY].

I'm going to read some instructions to you about completing the survey. Please listen carefully.

[PASS OUT SURVEY BOOKLETS AND THEN READ THE INSTRUCTIONS AT THE BEGINNING OF THE QUESTIONNAIRE AND HAVE THE STUDENTS FOLLOW ALONG. THEN, READ THE FOLLOWING TO THE CLASS:]

- A machine will read your answers automatically.
- Please use the pencil provided or a dark lead #2 pencil to mark your answers.
- Fill in each circle completely and cleanly erase any answer you wish to change.
- Do not make any other marks or comments on the questionnaire.
- Remember: Do not put your name on the questionnaire.
- If you are under age 18, **do not** take this survey.

Please answer the questions as honestly as you can so that the information that comes from the survey is correct and useful.

When you finish, please remain at your desk and read or work quietly. If, at any time during the survey, you have a question, raise your hand. For those of you who are still working at the end of class, I will tell you when it's time to stop. If you don't finish the entire questionnaire, that's okay.

You may begin.

[AT THE END OF CLASS, PUT ANY UNUSED QUESTIONNAIRES INTO THE ENVELOPE AND SAY:] The class period is over now. If you have not finished the survey, please stop where you are and close the survey booklet. I'm passing around an envelope now. Please put your survey inside the envelope and pass it to the next person. Will the last person seal the envelope and return it to me.

On behalf of the Utah Department of Human Services and [college], I would like to thank you for your participation in this important study.

CLASS SCRIPT - WITH DRAWING

[READ TO THE CLASS:] Today, we will be completing the <u>Utah Higher Education Health Behavior Survey</u>. The purpose of this survey is to learn what students in Utah colleges think about alcohol, tobacco, and other drug use, school, their peers, and health related behaviors. This information will be used for planning prevention services on campus.

The survey is **anonymous**. The survey does not ask for your name or any other identifying information, so no one will know how you answer any of the questions. You should read each question on the survey and fill in the circle for your answer. If there are any questions that you do not wish to answer for any reason, you do not have to answer them. Simply leave them blank.

At the end of class, I will pass around an envelope and ask you to place your completed survey booklet inside. The last person in class will seal this envelope before returning it to me. I will also pass around an additional envelope that you may put your name and phone number in to enter an "opportunity drawing" for your participation. You will be eligible to win [INSERT DETAILS OF YOUR DRAWING].

The survey is voluntary. If you do not wish to participate in the survey, please just set the survey aside and [SUGGEST AN ALTERNATE ACTIVITY SUCH AS READING QUIETLY].

I'm going to read some instructions to you about completing the survey. Please listen carefully.

[PASS OUT SURVEY BOOKLETS AND THEN READ THE INSTRUCTIONS AT THE BEGINNING OF THE QUESTIONNAIRE AND HAVE THE STUDENTS FOLLOW ALONG. THEN, READ THE FOLLOWING TO THE CLASS:]

- A machine will read your answers automatically.
- Please use the pencil provided or a dark lead #2 pencil to mark your answers.
- Fill in each circle completely and cleanly erase any answer you wish to change.
- Do not make any other marks or comments on the questionnaire.
- Remember: Do not put your name on the questionnaire.
- If you are under age 18, **do not** take this survey.

Please answer the questions as honestly as you can so that the information that comes from the survey is correct and useful. When you finish, please remain at your desk and read or work quietly. If, at any time during the survey, you have a question, raise your hand. For those of you who are still working at the end of class, I will tell you when it's time to stop. If you don't finish the entire questionnaire, that's okay. You may begin.

[AT THE END OF CLASS, PUT ANY UNUSED QUESTIONNAIRES INTO THE ENVELOPE AND SAY:] The class period is over now. If you have not finished the survey, please stop where you are and close the survey booklet. I'm passing around an envelope now. Please put your completed survey inside the envelope and pass it to the next person. Will the last person seal the envelope and return it to me. I'm also passing around the envelope to participate in the "opportunity drawing". Please fill out the entry blank with your preferred method of contact.

On behalf of the Utah Department of Human Services and [college], I would like to thank you for your participation in this important study.

Appendix C: College Survey Results, Frequency and Percentage for Each Response Category

Appendix D: Utah Higher Education Survey Frequency and Percentage Responding to Each Question

All data in Appendix D have been weighted by college as described on page 5 of the main report. (The specific weights for each college are provided in Table 2 of the main report.) The data have also been normalized so that the final count of responses in each category sum to the total number of valid unweighted responses to each question. It should be noted that the participant characteristics reported on page 7 in Table 3 are based on raw (or unweighted) data and therefore will not match the numbers provided in Appendix D. The raw data provided in Table 3 of the report are the actual numbers of respondents in each demographic category, whereas the weighted data in this appendix represent the amount of influence each demographic category exerts on the totals once the data have been weighted by the college contribution to the total Utah college

Question	Response	#	%
1. Are you:	male	3,757	45.6
	female	4,490	54.5
2. How old are you?	18	786	9.7
	19	955	11.7
	20	761	9.4
	21	839	10.3
	22	780	9.6
	23-24	1,303	16.0
	25-30	1,670	20.6
	31-40	589	7.2
	41-60	428	5.3
	61 or older	17	0.2
3. What is your class level	? Freshman	1,972	23.9
	Sophomore	2,298	27.9
	Junior	1,962	23.8
	Senior	1,520	18.4
	Grad/Professional	198	2.4
	Not seeking a degree	60	0.7
	Certificate program	62	8.0
	Other	177	2.1
4. What is your major area	of study? Agriculture	55	0.7
	Business	1,267	15.4
	Education	744	9.1
	Fine Arts	489	6.0
	Humanities	571	7.0
	Human Services/Health Professional	1,580	19.3
	Natural Resources	56	0.7
	Sciences/Engineering	1,325	16.1
	Social Services	907	11.1
	Trades/Technology	337	4.1
	Undecided	876	10.7

(Question	Response	#	%
5./6. Are you Hispanic or Latino? What is your race?	Are you Hispanic or Latino?	Hispanic or Latino	440	5.4
	Black or African American	66	0.8	
		Asian	288	3.6
		American Indian	132	1.7
		Alaska Native	16	0.2
		White	7,560	94.8
		Native Hawaiian or Other Pacific Islander	101	1.3
		Multi-Ethnic	155	1.9
7.	What is your current student status?	Full-Time (12+ credits)	5,916	72.4
	tus :	Part-Time (1-11 credits)	2,252	27.
8.	What is your current resident status?	On-Campus	1,069	13.
	status?	Off-Campus	7,013	86.
9./ 10.	Body Mass Index Calculated from the following two questions: What	Underweight	474	5.
	is your height (in feet and inches)?	Normal Weight	4,487	55.
	What is your weight (in pounds)?	Overweight	1,997	24.
		Obese Class I	625	7.
		Obese Class II	286	3.
		Obese Class III	181	2.
11.	What is your place of permanent	In-state (Utah)	7,565	91.
	residence?	USA, but out of state	558	6.
		Country other than USA	128	1.
12.	What is your relationship status?	Single	4,990	60.
		Married	2,652	32.
		Separated	46	0.
		Divorced	273	3.
		Widowed	21	0.
		Cohabitating	278	3.
13.		Heterosexual	7,821	95.
	lowing best describes your sexual orientation/identity:	Bisexual	138	1.
		Gay/Lesbian	104	1.
		Transgender	8	0.
		Unsure	98	1.
14.	, , , , , , , , , , , , , , , , , , , ,	Learning Disability	278	3.
	of the following? (Please mark all that apply)	Attention Deficit Disorder	428	5.
		Deaf or hard of hearing?	121	1.
		Blind or low vision not corrected with glasses or contacts	89	1.
		Mobility problems?	63	0.
		Chronic health conditions?	333	4.

C	uestion	Response	#	%
15.	Where do you live while attending	Houses/apartment/etc	7,481	90.7
school?	Residence hall	519	6.3	
		Approved housing	123	1.5
		Fraternity or sorority	31	0.4
		Other	93	1.1
16.	Are you currently employed?	No	1,826	22.2
		Yes, full time	2,543	30.9
		Yes, part-time	3,872	47.0
17.	What is your approximate cumulative grade point average?	A	3,467	42.5
	ave grade point average.	В	3,904	47.9
		C	743	9.1
		D	42	0.5
10	How often do you attend religious	Never	1,129	13.7
10.	services or activities?	Rarely	1,123	14.4
		1-2 times a month	637	7.7
		About once a week or more	5,300	64.2
			0,000	· · · -
19.	What is your religious preference	Catholic	318	3.9
	(choose the religion with which you identify the most)?	Jewish	13	0.2
	identify the most)?	LDS	6,050	73.4
		Protestant	329	4.0
		Other	583	7.1
		No preference	947	11.5
20.	Does your campus have alcohol and drug policies?	Don't know	2,529	30.6
		No	71	0.9
		Yes	5,654	68.5
21.	If so, are they enforced?	Don't know	5,239	64.1
		No	292	3.6
		Yes	2,639	32.3
22.		Don't know	5,330	65.1
	alcohol prevention program?	No	64	8.0
		Yes	2,796	34.1
23.	Do you believe your campus is concerned about the prevention of	Don't know	2,187	26.6
	drug and alcohol use?	No	539	6.6
		Yes	5,493	66.8
24.	Are you actively involved in efforts	Don't know	483	5.9
	to prevent drug and alcohol use	No	7,225	88.1
	problems on your campus?	Yes	496	6.1
		. 50	400	0.1

(Question I	Response	#	%
		Don't know	639	7.8
	your campus tobacco-free?	No	1,332	16.2
		Yes	6,257	76.0
26.	Would you prefer to attend parties wi	here:		
a.	alcohol is available?	Yes	1,220	14.8
۵.	alconor is available.	No	4,945	59.9
		Doesn't matter	2,084	25.3
b.	. drugs are available?	Yes	196	2.4
		No	7,355	89.2
		Doesn't matter	697	8.5
27.	7. Do you support stricter disciplinary	Don't know	1,098	13.3
	consequences for students who	No	993	12.1
	repeatedly violate campus alcohol policies?	Yes	6,139	74.6
28.	Do you think other students sup- port stricter disciplinary conse-	Don't know	2,917	35.4
	quences for students who repeat-	No	1,443	17.5
	edly violate alcohol policies?	Yes	3,878	47.1
29.	Think back over the last two weeks.	None	7,356	89.1
	How many times have you had five	Once	416	5.0
	or more drinks at a sitting?	Twice	254	3.1
		3 to 5 times	161	2.0
		6 to 9 times	41	0.5
		10 or more times	25	0.3
30.	What is the average number of	0	6,645	81.5
30.	What is the average number of drinks you consume in a week	1	486	6.0
		2-3	417	5.1
		4-5	236	2.9
		6-7	97	1.2
		8-9	41	0.5
		10 or more	233	2.9
31.	During the past year have you ever stopped smoking for a day or lon-	I didn't smoke in the past 12 months	7,166	87.3
	ger because you were trying to quit smoking?	No	613	7.5
		Yes	432	5.3
32.	Would you consider using any of the	following services to quit		
a.	smoking? calling a Quit Line	I didn't smoke in the past 12 months	6,885	86.8
		No	783	9.9
		Yes	266	3.4

	Question	Response	#	%
b.	a campus based stop smoking clinic or class	I didn't smoke in the past 12 months	6,841	86.7
		No	749	9.5
		Yes	303	3.8
c.	one-on-one counseling from a doctor or nurse	I didn't smoke in the past 12 months	6,834	86.6
		No	686	8.7
		Yes	371	4.7
d.	d. self help material, books or videos	I didn't smoke in the past 12 months	6,839	86.7
		No	735	9.3
		Yes	312	4.0
e.	e. free internet quit service	I didn't smoke in the past 12 months	6,848	86.8
		No	713	9.0
		Yes	333	4.2
33.	During the past 30 days:			
a.		None	5,822	70.6
	tobacco products have you seen on or near campus?	A few	2,226	27.0
	or nour campus.	A lot	200	2.4
b.	b. how many posters, newspaper articles, or other print displays with anti-tobacco messages have you	None	3,531	42.9
		A few	4,072	49.5
	seen on or near campus?	A lot	624	7.6
	On how many occasions (if any) hav	e you:		
34.	had alcoholic beverages (beer, wine	0 occasions	5,815	70.1
	or hard liquor) to drink in the past	1-2 occasions	379	4.6
	year -more than just a few sips?	3-5 occasions	363	4.4
		6-9 occasions	287	3.5
		10-19 occasions	372	4.5
		20-39 occasions	373	4.5
		40+ occasions	703	8.5
35.	had beer, wine or hard liquor to	0 occasions	6,464	78.1
	drink during the past 30 days?	1-2 occasions	739	8.9
		3-5 occasions	431	5.2
		6-9 occasions	255	3.1
		10-19 occasions	238	2.9
		20-39 occasions	111	1.3
		40+ occasions	40	0.5

(Question	Response	#	%
36.	been drunk or very high from drink-	0 occasions	7,249	87.7
	ing alcoholic beverages during the	1-2 occasions	634	7.7
	past 30 days?	3-5 occasions	221	2.7
		6-9 occasions	94	1.1
		10-19 occasions	56	0.7
		20-39 occasions	9	0.1
		40+ occasions	6	0.1
37.	used marijuana (grass, pot) or	0 occasions	7,619	92.2
	hashish (hash, hash oil) in the past year?	1-2 occasions	218	2.6
	year:	3-5 occasions	95	1.2
		6-9 occasions	56	0.
		10-19 occasions	66	0.6
		20-39 occasions	36	0.4
		40+ occasions	170	2.
38.	used marijuana (grass, pot) or	0 occasions	7,938	96.
	hashish (hash, hash oil) during the	1-2 occasions	141	1.
	past 30 days?	3-5 occasions	33	0.
		6-9 occasions	20	0.
		10-19 occasions	46	0.
		20-39 occasions	34	0.
		40+ occasions	51	0.
39.	used LSD or other psychedelics in the past year?	0 occasions	8,135	98.
		1-2 occasions	83	1.
		3-5 occasions	25	0.
		6-9 occasions	10	0.
		10-19 occasions	2	0.
		20-39 occasions	0	0.
		40+ occasions	2	0.
40.	used LSD or other psychedelics	0 occasions	8,250	99.
	during the past 30 days?	1-2 occasions	14	0.
		3-5 occasions	1	0.
		6-9 occasions	4	0.
		10-19 occasions	0	0.
		20-39 occasions	0	0.
		40+ occasions	2	0.
41.	used cocaine or crack in the past	0 occasions	8,132	98.
	year?	1-2 occasions	61	0.
		3-5 occasions	35	0.
		6-9 occasions	9	0.
		10-19 occasions	9	0.
		20-39 occasions	6	0.
		20-39 Occasions	•	٠.

42. used cocaine or crack during the past 30 days? 0 occasions 8,220 99,6 1-2 occasions 21 0.3 3-5 occasions 11 0.1 6-9 occasions 1 0.0 43. sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays (nitrous or poppers), in order to get high in the past year? 0 occasions 8,211 99.3 44. sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays (nitrous or poppers), in order to get high during the past 30 days? 0 occasions 2 0.0 44. sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays (nitrous or poppers), in order to get high during the past 30 days? 0 occasions 8,245 99.8 44. sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays (nitrous or poppers), in order to get high during the past 30 days? 0 occasions 8,245 99.8 45. used phenoxydine (pox, px, breeze) in the past year? 0 occasions 0 occasions 0 occasions 46. used phenoxydine (pox, px, breeze) during the past 30 days? 0 occasions 8,384 100.0 47. used methamphetamines (meth, speed, crank, crystal meth) in the past year? 0 occasions 8,208 99.4 48. used methamphetamines (m		Question	Response	#	%
3-5 occasions	42.	used cocaine or crack during the	0 occasions	8,220	99.6
43. sniffed glue, breathed the contents of an aerosol spray can, or inhaled other pases or sprays (nitrous or poppers), in order to get high in the past year? 0 occasions 1		past 30 days?	1-2 occasions	21	0.3
10.19 occasions			3-5 occasions	11	0.1
20-39 occasions 0			6-9 occasions	3	0.0
40+ occasions 1 0.0 43. sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays (nitrous or poppers), in order to get high in the past year? 44. sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays (nitrous or poppers), in order to get high during the past 30 days? 44. sniffed glue, breathed the contents of an aerosol spray can, or inhaled other gases or sprays (nitrous or poppers), in order to get high during the past 30 days? 45. used phenoxydine (pox, px, breeze) during the past 30 days? 46. used phenoxydine (pox, px, breeze) during the past 30 days? 47. used methamphetamines (meth, speed, crank, crystal meth) in the past year? 48. used methamphetamines (meth, speed, crank, crystal meth) in the past year? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 49. occasions 40. occasions			10-19 occasions	1	0.0
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45. used phenoxydine (pox, px, breeze) in the past year? 46. used phenoxydine (pox, px, breeze) during the past 30 days? 47. used methamphetamines (meth, speed, crank, crystal meth) in the past year? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 49. docasions 40. docasions 50. docasions 60. occasions 60.				-	
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47. used methamphetamines (meth, speed, crank, crystal meth) in the past year? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 49. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 40. occasions 40. occasions 50. occasions 6-9 occasions 6-9 occasions 6-9 occasions 10-19 occasions 10-0	45.		0 occasions	8,384	100.0
speed, crank, crystal meth) in the past year? 1-2 occasions 28 0.3 6-9 occasions 8 0.1 10-19 occasions 4 0.0 10-19 occasions 0 0.0 40+ occasions 5 0.1 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 0 occasions 8,250 100.0 1-2 occasions 2 0.0 6-9 occasions 0 0.0 6-9 occasions 0 0.0 10-19 occasions 0 0.0 20-39 occasions 1 0.0	46.		0 occasions	8,384	100.0
Past year? 3-5 occasions 6-9 occasions 10-19 occasions 40+ occasions 40+ occasions 50.1 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 1-2 occasions 1-2 occasions 0 0.0 10-19 occasions 1-2 occasions 0 0.0 10-19 occasions 0 0.0 10-19 occasions 0 0.0 10-19 occasions 0 0.0 10-19 occasions 1 0.0	47.	used methamphetamines (meth,	0 occasions	8,208	99.4
3-5 occasions 8 0.1 6-9 occasions 4 0.0 10-19 occasions 0 0.0 40+ occasions 5 0.1 48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 1-2 occasions 0 0.0 10-19 occasions 2 0.0 10-19 occasions 0 0.0 10-19 occasions 1 0.0			1-2 occasions	28	0.3
48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 10-19 occasions 4 0.1 40+ occasions 5 0.1 1-2 occasions 2 0.0 1-2 occasions 0 0.0 6-9 occasions 0 0.0 10-19 occasions 0 0.0 20-39 occasions 1 0.0		past year :	3-5 occasions	8	0.1
48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 1-2 occasions 3-5 occasions 0 0.0 1-2 occasions 2 0.0 1-3-5 occasions 0 0.0 10-19 occasions 0 0.0 20-39 occasions 1 0.0			6-9 occasions	4	0.0
48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 1-2 occasions 3-5 occasions 0 0.0 6-9 occasions 0 0.0 10-19 occasions 1 0.0			10-19 occasions	4	0.1
48. used methamphetamines (meth, speed, crank, crystal meth) during the past 30 days? 1-2 occasions 3-5 occasions 6-9 occasions 0 0.0 10-19 occasions 0 0.0 20-39 occasions 1 0.0			20-39 occasions	0	0.0
speed, crank, crystal meth) during the past 30 days? 1-2 occasions 2 0.0 3-5 occasions 0 0.0 6-9 occasions 0 0.0 10-19 occasions 0 0.0 20-39 occasions 1 0.0			40+ occasions	5	0.1
speed, crank, crystal meth) during the past 30 days? 1-2 occasions 2 0.0 3-5 occasions 0 0.0 6-9 occasions 0 0.0 10-19 occasions 0 0.0 20-39 occasions 1 0.0	48.	used methamphetamines (meth.	0 occasions	8,250	100.0
3-5 occasions 0 0.0 6-9 occasions 0 0.0 10-19 occasions 0 0.0 20-39 occasions 1 0.0		speed, crank, crystal meth) during	1-2 occasions	•	
10-19 occasions 0 0.0 20-39 occasions 1 0.0		the past 30 days?	3-5 occasions	0	0.0
20-39 occasions 1 0.0			6-9 occasions	0	0.0
			10-19 occasions	0	0.0
40+ occasions 0 0.0			20-39 occasions	1	0.0
			40+ occasions	0	0.0

	Question	Response	#	%
49.	used stimulants, other than meth-	0 occasions	8,121	98.5
	amphetamines (amphetamines, Ritalin, Dexedrine) without a doctor	1-2 occasions	53	0.6
	telling you to take them, in the past	3-5 occasions	30	0.4
	year?	6-9 occasions	9	0.1
		10-19 occasions	16	0.2
		20-39 occasions	8	0.1
		40+ occasions	10	0.1
50.	used stimulants, other than meth-	0 occasions	8,195	99.3
	amphetamines (amphetamines,	1-2 occasions	29	0.4
	Ritalin, Dexedrine) without a doctor telling you to take them, during the	3-5 occasions	10	0.1
	past 30 days?	6-9 occasions	3	0.0
		10-19 occasions	6	0.1
		20-39 occasions	3	0.0
		40+ occasions	4	0.0
51.	used sedatives (tranquilizers, such as valium or xanax, barbiturates,	0 occasions	7,821	94.7
	or sleeping pills) without a doctor	1-2 occasions	190	2.3
	telling you to take them, in the past year?	3-5 occasions	89	1.1
	,	6-9 occasions 10-19 occasions	56 48	0.7 0.6
		20-39 occasions	23	0.0
		40+ occasions	31	0.3
		40 · Occasions	31	0.4
52.	used sedatives (tranquilizers, such	0 occasions	8,056	97.6
	as valium or xanax, barbiturates, or sleeping pills) without a doctor	1-2 occasions	132	1.6
	telling you to take them, during the	3-5 occasions	37	0.5
	past 30 days?	6-9 occasions	12	0.1
		10-19 occasions	8	0.1
		20-39 occasions	11	0.1
		40+ occasions	2	0.0
53.	used heroin or other opiates (co-	0 occasions	7,973	96.6
	deine, oxycontin, Lortab) without a doctor telling you to take them, in	1-2 occasions	109	1.3
	the past year?	3-5 occasions	67	0.8
		6-9 occasions	18	0.2
		10-19 occasions	43	0.5
		20-39 occasions	15	0.2
		40+ occasions	30	0.4
54.	used heroin or other opiates (co-	0 occasions	8,145	98.7
	deine, oxycontin, Lortab) without	1-2 occasions	62	0.8
	a doctor telling you to take them, during the past 30 days?	3-5 occasions	26	0.3
	and pact of days.	6-9 occasions	4	0.0
		10-19 occasions	10	0.1
		20-39 occasions	6	0.1
		40+ occasions	2	0.0
			_	-

C	Question	Response	#	%
55.	used DXM (dextromethorphan,	0 occasions	8,197	99.3
	drinking cough syrup to get high) in the past year?	1-2 occasions	44	0.5
	the past year:	3-5 occasions	9	0.1
		6-9 occasions	3	0.0
		10-19 occasions	3	0.0
		20-39 occasions	1	0.0
		40+ occasions	1	0.0
56.	used DXM (dextromethorphan,	0 occasions	8,242	99.8
	drinking cough syrup to get high)	1-2 occasions	12	0.1
uui	luring the past 30 days?c	3-5 occasions	2	0.0
		6-9 occasions	0	0.0
		10-19 occasions	0	0.0
		20-39 occasions	0	0.0
		40+ occasions	0	0.0
57.	used MDMA ('X', 'E', or ecstasy) in	0 occasions	8,134	98.
	the past year?	1-2 occasions	62	0.8
		3-5 occasions	31	0.4
		6-9 occasions	18	0.
		10-19 occasions	2	0.
		20-39 occasions	4	0.
		40+ occasions	4	0.
58.	used MDMA ('X', 'E', or ecstasy)	0 occasions	8,214	99.0
	during the past 30 days?	1-2 occasions	25	0.
		3-5 occasions	2	0.
		6-9 occasions	2	0.
		10-19 occasions	2	0.
		20-39 occasions	1	0.
		40+ occasions	0	0.
59.	used club drugs other than MDMA	0 occasions	8,219	99.
	(such as GHB, rohypnol, or ket- amine) in the past year?	1-2 occasions	17	0.
	animo, in the past year.	3-5 occasions	1	0.
		6-9 occasions	0	0.
		10-19 occasions	0	0.
		20-39 occasions	0	0.
		40+ occasions	2	0.
60.	used club drugs other than MDMA	0 occasions	8,254	99.
	(such as GHB, rohypnol, or ket- amine) during the past 30 days?	1-2 occasions	3	0.
	amme, during the past 30 days:	3-5 occasions	0	0.
		6-9 occasions	1	0.
		10-19 occasions	0	0.
			0	0.
		20-39 occasions	U	0.0

Question	Response	#	%
61. Have you ever used smokeless	Never	7,447	90.2
tobacco (chew, snuff, plug, dipping tobacco, or chewing tobacco)?	Once or twice	505	6.1
tobacco, or chewing tobacco)?	Once in a while but not regularly	130	1.6
	Regularly in the past	127	1.5
	Regularly now	46	0.6
62. How often have you taken smoke-	Not at all	8,138	98.6
less tobacco during the past 30	Once or twice	47	0.6
days?	Once or twice a week	10	0.1
	Three to five times a week	9	0.1
	About once a day	6	0.1
	More than once a day	47	0.6
	_		
63. Have you ever smoked cigarettes?	Never	5,861	71.1
	Once or twice	989	12.0
	Once in a while but not regularly	474	5.8
	Regularly in the past	643	7.8
	Regularly now	273	3.3
64. How frequently have you smoked	Not at all	7,719	93.6
cigarettes during the past 30 days?	Less than 1 cigarette a day	205	2.5
	1-5 cigarettes a day	145	1.8
	About 1/2 pack a day	99	1.2
	About 1 pack a day	77	0.9
	About 1½ packs a day	4	0.1
	2 packs or more a day	1	0.0
65. During the last month, about how	None	7.057	06.4
65. During the last month, about how many marijuana cigarettes, or the	None	7,957	96.4
equivalent, did you smoke a day, on	Less than 1 a day	187	2.3
the average? (If you shared them with other people, count only the	1 a day	42	0.5
amount YOU smoked).	2-3 a day	42 11	0.5 0.1
	4-6 a day 7-10 a day	9	0.1
	11 or more a day	2	0.0
66. Have you ever used prescription drugs to manage pain in a way that was not originally intended by your doctor? (Mark all that apply)	I have used medication for a longer time period than originally intended by my doctor.	508	8.1
	I have used medication at a higher dosage than originally intended by my doctor.	535	8.5
	I have used pain medica- tion for an unrelated injury, pain, or problem.	998	15.8
	I have used someone else's prescription.	1,109	17.6
	I use prescription drugs as prescribed.	5,506	87.3

(Question	Response	#	%
67.	tion drugs for non-medical reasons,	I have obtained prescription drugs over the internet.	68	1.2
	such as to get high, relax, improve mood, or socialize with friends; or to manage pain in a way that was	I have lied to obtain pre- scription drugs.	74	1.3
	not originally intended by your doctor (for example, for a longer time period, at a higher dose, or for an unrelated injury)? (Mark all that apply)	I have had more than one doctor at the same time for the purpose of getting multiple prescriptions of the same drug.	28	2.0
		I have taken someone else's prescription.	764	13.0
		I obtain and use prescrip- tion drugs appropriately.	5,407	92.2
68.	Students have different ideas of what or do. What do you think is the perce school who, in the PAST YEAR:			
a.	have used tobacco products?	None	575	7.0
		5% or less	326	4.0
		6-10%	945	11.
		11-20%	1,923	23.
		21-40%	2,529	30.
		41-60%	1,494	18.
		61-80%	404	4.
		81-100%	25	0.
b.	have had alcohol (more than a sip)?	None	564	6.
		5% or less	135	1.
		6-10%	329	4.
		11-20%	810	9.
		21-40%	1,909	23.
		41-60%	2,473	30.
		61-80%	1,729	21.
		81-100%	266	3.
C.	have used marijuana?	None	631	7.
		5% or less 6-10%	836	10.
		11-20%	1,589	19.
		21-40%	2,064 1,875	25. 22.
		41-60%	901	11.
		61-80%	272	3.
		81-100%	25	0.
d.	have used an illegal drug (not	None	648	7.
	including marijuana)?	5% or less	1,631	19.
		6-10%	1,929	23.
		11-20%	2,051	25
		21-40%	1,276	15
		41-60%	516	6
		61-80%	117	1.

	Question	Response	#	%
е.	have used prescription drugs for	None	636	7.7
0.	non-medical reasons?	5% or less	819	10.0
		6-10%	1,293	15.8
		11-20%	1,738	21.2
		21-40%	1,696	20.7
		41-60%	1,231	15.0
		61-80%	670	8.2
		81-100%	124	1.5
69.	Have any of your family had alcohol	or other drug problems:		
a.	father	No	6,925	86.1
		Yes	1,117	13.9
			,	
b.	mother	No	7,509	93.5
		Yes	520	6.5
c.	brother(s)/sister(s)	No	6,160	76.2
		Yes	1,924	23.8
d.	other relative(s)	No	4,071	50.1
		Yes	4,049	49.9
70.	How often have you experienced the ing or drug use during the last year:			
a.	had a hangover	Never	6,576	80.7
		Once	514	6.3
		Twice	312	3.8
		3 to 5 times	360	4.4
		6 to 9 times	138	1.7
		10 or more times	247	3.0
b.	performed poorly on a test or im-	Never	7,596	93.6
υ.	portant project	Once	180	2.2
		Twice	165	2.0
		3 to 5 times	123	1.5
		6 to 9 times	23	0.3
		10 or more times	31	0.4
c.	been in trouble with police, resi-	Never	7,943	97.9
	dence hall, or other college authorities	Once	126	1.5
		Twice	27	0.3
		3 to 5 times	19	0.2
		6 to 9 times	1	0.0
		10 or more times	2	0.0

	Question	Response	#	%
d.	damaged property, pulled fire	Never	8,028	99.1
	alarm, etc.	Once	30	0.4
		Twice	23	0.3
		3 to 5 times	13	0.2
		6 to 9 times	3	0.0
		10 or more times	2	0.0
e.	got into an argument or fight	Never	7,389	91.3
		Once	292	3.6
		Twice	177	2.2
		3 to 5 times	154	1.9
		6 to 9 times	40	0.5
		10 or more times	41	0.5
f.	got nauseated or vomited	Never	6,776	83.6
		Once	593	7.3
		Twice	338	4.2
		3 to 5 times	248	3.1
		6 to 9 times	77	1.0
		10 or more times	69	0.9
g.	driven a car while under the influ-	Never	7,540	93.0
	ence	Once	213	2.6
		Twice	113	1.4
		3 to 5 times	121	1.5
		6 to 9 times	39	0.5
		10 or more times	84	1.0
h.	missed a class	Never	7,396	91.4
		Once	188	2.3
		Twice	164	2.0
		3 to 5 times	181	2.2
		6 to 9 times	56	0.7
		10 or more times	109	1.4
i	been criticized by someone I know	Never	7,165	88.6
	20011 OTHIOLEGE By SOMEONE I KNOW	Once	303	3.8
		Twice	240	3.0
		3 to 5 times	209	2.6
		6 to 9 times	70	0.9
		10 or more times	98	1.2
_				6 = =
J.	thought I might have a drinking or other drug problem	Never	7,719	95.5
	 	Once	121	1.5
		Twice	78 61	1.0
		3 to 5 times 6 to 9 times	61 32	0.7 0.4
		10 or more times	75	0.4
		to or more times	75	0.9

	Question	Response	#	%
k.	had a memory loss	Never	7,390	91.4
ĸ.	nau a memory loss	Once	284	3.5
		Twice	158	1.9
		3 to 5 times	146	1.8
		6 to 9 times	38	0.5
		10 or more times	74	0.9
I.	done something I later regretted	Never	7,098	87.6
		Once	408	5.0
		Twice	245	3.0
		3 to 5 times	205	2.5
		6 to 9 times	53	0.7
		10 or more times	90	1.1
m.	been arrested for DWI/DUI	Never	8,047	99.5
		Once	39	0.5
		Twice	0	0.0
		3 to 5 times	0	0.0
n.	have been taken advantage of sexually	Never	7,828	96.7
	Sexually	Once	160	2.0
		Twice	61	8.0
		3 to 5 times	33	0.4
		6 to 9 times	4	0.1
		10 or more times	6	0.1
0.	have taken advantage of another	Never	8,037	99.3
0.	sexually	Once	34	0.4
		Twice	11	0.1
		3 to 5 times	6	0.1
		6 to 9 times	2	0.0
		10 or more times	4	0.1
p.	tried unsuccessfully to stop using	Never	7,906	97.7
		Once	71	0.9
		Twice	45	0.6
		3 to 5 times	31	0.4
		6 to 9 times	14	0.2
		10 or more times	24	0.3
q.	seriously thought about suicide	Never	7,785	96.3
		Once	119	1.5
		Twice	61	8.0
		3 to 5 times	57	0.7
		6 to 9 times	20	0.2
		10 or more times	43	0.5

	Question	Response	#	%
r.	seriously tried to commit suicide	Never	8,026	99.1
		Once	43	0.5
		Twice	15	0.2
		3 to 5 times	10	0.1
		6 to 9 times	3	0.0
		10 or more times	2	0.0
s.	been hurt or injured.	Never	7,620	94.1
	•	Once	224	2.8
		Twice	119	1.5
		3 to 5 times	87	1.1
		6 to 9 times	14	0.2
		10 or more times	31	0.4
71.	Within the last year to what extent hat the following activities?	ave you participated in any of		
a.	intercollegiate athletics	Not involved	5,737	69.8
		Attended	2,045	24.9
		Active involvement (non- leader)	345	4.2
		Leadership position	91	1.1
b.	intramural or club sports	Not involved	6,251	76.2
		Attended	992	12.1
		Active involvement (non- leader)	790	9.6
		Leadership position	173	2.1
c.	social fraternities or sororities	Not involved	7,563	92.5
		Attended	367	4.5
		Active involvement (non- leader)	153	1.9
		Leadership position	95	1.2
d.	religious and interfaith groups	Not involved	3,061	37.4
		Attended	1,741	21.3
		Active involvement (non- leader)	2,086	25.5
		Leadership position	1,304	15.9
e.	international and language groups	Not involved	7,045	86.1
		Attended	759	9.3
		Active involvement (non- leader)	326	4.0
		Leadership position	55	0.7
f.	minority and ethnic organizations	Not involved	7,351	89.8
		Attended	612	7.5
		Active involvement (non- leader)	162	2.0
		Leadership position	62	8.0

	Question	Response	#	%
		·		
g.	political and social action groups	Not involved	6,897	84.3
		Attended Active involvement (non-	882 283	10.8 3.5
		leader)	203	3.5
		Leadership position	124	1.5
h.	music and other performing arts	Not involved	4,802	58.6
	groups	Attended	2,393	29.2
		Active involvement (non-	783	9.6
		leader)	242	2.6
		Leadership position	213	2.6
i.	atudant navananar radio TV	Not involved	7,023	86.2
١.	student newspaper, radio, TV, magazine, etc.	Attended	7,023 863	10.6
		Active involvement (non-	190	2.3
		leader)		•
		Leadership position	71	0.9
j.	volunteer time to help others	Not involved	3,598	44.0
		Attended	2,156	26.3
		Active involvement (non- leader)	1,908	23.3
		Leadership position	522	6.4
k.	student government	Not involved	7,509	91.8
		Attended	325	4.0
		Active involvement (non- leader)	152	1.9
		Leadership position	196	2.4
72.	, , , , , , , , , , , , , , , , , , , ,	feel (or would feel) about you		
a.	trying marijuana once or twice	Don't disapprove	1,674	20.4
	, , , , , , , , , , , , , , , , , , , ,	Disapprove	1,721	21.0
		Strongly disapprove	4,804	58.6
b.	smoking marijuana occasionally	Don't disapprove	1,309	16.0
		Disapprove	1,475	18.0
		Strongly disapprove	5,408	66.0
c.	smoking marijuana regularly	Don't disapprove	753	9.2
	J , J , J , J , J , J , J , J , J , J ,	Disapprove	1,340	16.4
		Strongly disapprove	6,092	74.4
d.	trying cocaine once or twice	Don't disapprove	570	7.0
		Disapprove	1,232	15.0
		Strongly disapprove	6,384	78.0

	Question	Response	#	%
e.	taking cocaine regularly	Don't disapprove	252	3.1
	taning cocamo regularly	Disapprove	946	11.6
		Strongly disapprove	6,986	85.4
		от от 1979 и потры от 1979 и п	2,223	
f.	trying LSD once or twice	Don't disapprove	629	7.7
		Disapprove	1,128	13.8
		Strongly disapprove	6,397	78.5
g.	taking LSD regularly	Don't disapprove	286	3.5
		Disapprove	957	11.7
		Strongly disapprove	6,930	84.8
h.	trying amphetamines once or twice	Don't disapprove	468	5.8
		Disapprove	1,237	15.2
		Strongly disapprove	6,431	79.0
i.	taking amphetamines regularly	Don't disapprove	258	3.2
		Disapprove	928	11.4
		Strongly disapprove	6,970	85.5
j.	taking one or two drinks of an alco- holic beverage (beer, wine, liquor)	Don't disapprove	1,664	20.4
	nearly every day	Disapprove	1,639	20.1
		Strongly disapprove	4,846	59.5
	Add a form of the delate words	David dia sama	574	7.0
k.	taking four or five drinks nearly every day	Don't disapprove	574	7.0
		Disapprove	1,569	19.2
		Strongly disapprove	6,031	73.8
I.	having five or more drinks in one	Don't disapprove	1,334	16.3
	sitting	Disapprove	1,245	15.2
		Strongly disapprove	5,592	68.4
m.	using tobacco regularly	Don't disapprove	947	11.6
		Disapprove	1,603	19.6
		Strongly disapprove	5,625	68.8
n.	taking steroids for body building or improved athletic performance	Don't disapprove	421	5.1
	improved atmetic performance	Disapprove	1,681	20.5
		Strongly disapprove	6,091	74.3
74.	Do you believe that alcohol has the fo	ollowing effects?		
	-	_	E 400	00.7
a.	breaks the ice	No	5,129	62.7
		Yes	3,057	37.3
h	anhanasa agaigl gativity	No	E 207	647
b.	enhances social activity	No Yes	5,297 2,804	64.7 35.3
		169	2,894	35.3

	Question	Response	#	%
	4.0001011	1100polise	II	,0
c.	makes it easier to deal with stress	No	6,457	79.0
		Yes	1,714	21.0
d.	facilitates a connection with peers	No	5,871	71.9
		Yes	2,291	28.1
e.	gives people something to talk	No	4,822	59.1
	about	Yes	3,344	41.0
f.	facilitates male bonding	No	5,960	73.2
		Yes	2,181	26.8
g.	facilitates female bonding	No	6,515	80.0
		Yes	1,633	20.0
h.	allows people to have more fun	No	6,089	74.7
		Yes	2,061	25.3
i.	gives people something to do	No	4,330	53.0
		Yes	3,833	47.0
j.	makes food taste better	No	7,492	92.1
		Yes	647	7.9
k.	makes women sexier	No	7,024	86.3
		Yes	1,114	13.7
I.	makes men sexier	No	7,375	90.6
		Yes	767	9.4
				00.0
m.	makes me sexier	No	7,514	92.6
		Yes	598	7.4
	facilitates covered annual territories	No	E 050	60.4
n.	facilitates sexual opportunities	No Yes	5,058	62.1
		res	3,088	37.9
74.	Campus environment:			
			7 400	00.0
a.	Does the social atmosphere on this campus promote alcohol use?	No	7,160	88.3
	. ,	Yes	949	11.7
L	Door the pools of the court of the	No	7 000	04.0
b.	Does the social atmosphere promote other drug use?	No	7,680	94.6
	-	Yes	435	5.4
	De veu feel eefe en this samme?	No	E40	6.0
C.	Do you feel safe on this campus?	No	543 7 623	6.6
		Yes	7,623	93.4

Question	Response	#	%	
74. On this campus, is drinking a central following groups:	part in the social life of the			
a. Male students	No	5,273	68.2	
	Yes	2,459	31.8	
b. Female students	No	6,235	80.7	
	Yes	1,487	19.3	
c. Faculty/staff	No	7,062	91.5	
	Yes	659	8.5	
d. Alumni	No	6,913	90.2	
	Yes	754	9.8	
e. Athletes	No	5,410	70.6	
	Yes	2,255	29.4	
f. Fraternities	No	3,751	49.0	
	Yes	3,906	51.0	
g. Sororities	No	4,346	57.0	
	Yes	3,277	43.0	
76. To what extent has your alcohol use	Increased	326	4.0	
changed within the last 12 months?	About the same	1,114	13.6	
	Decreased	880	10.7	
	I do not use	5,893	71.8	
77. To what extent has your illegal drug use changed within the last 12	Increased	97	1.2	
months?	About the same	289	3.5	
	Decreased I do not use	285 7,525	3.5 91.8	
70 Touch doubt doubt doubt with the	following statements 0			
78. To what extent do you agree with thea. I feel valued as a person on this	Strongly agree	1,024	12.5	
campus	Agree	3,064	37.4	
	Neutral	3,233	39.5	
	Disagree	650	7.9	
	Strongly disagree	222	2.7	
b. I feel that faculty and staff care	Strongly agree	1,285	15.7	
about me as a student	Agree	4,052	49.5	
	Neutral	2,094	25.6	
	Disagree Strongly disagree	601 160	7.3 2.0	

	Question	Response	#	%
		·	4.000	40.0
c.	I have a responsibility to contribute to the well-being of other students	Strongly agree	1,308	16.0
	•	Agree Neutral	3,951 2,405	48.2 29.3
			432	5.3
		Disagree Strongly disagree	98	1.2
		Strongly disagree	90	1.2
	M	Ctuamah, anna	0.57	40.5
d.	My campus encourages me to help others in need	Strongly agree	857	10.5 38.8
		Agree Neutral	3,179	39.4
		Disagree	3,229 779	9.5
		Strongly disagree	144	1.8
		Strongly disagree	144	1.0
e.	I abide by the university policy and	Strongly agree	5,112	62.6
G.	regulations that concern alcohol	Agree	1,905	23.3
	and other drug use	Neutral	863	10.6
		Disagree	172	2.1
		Strongly disagree	113	1.4
		otroligiy disagree	110	1.4
f.	Drug and alcohol use are a normal	Strongly agree	333	4.1
	part of college life	Agree	1,565	19.1
		Neutral	2,218	27.1
		Disagree	1,986	24.3
		Strongly disagree	2,077	25.4
		onengry mongree	_,0	
79.	In the last month, have you pro-	Never	7,711	94.3
	vided or served alcohol to a person	Once or Twice	311	3.8
	younger than age 21?	Three or more times	155	1.9
80.	In which of the following ways does of fere with your life on or around camp	•		
a.	Interrupts your studying	No	6,648	82.9
		Yes	1,373	17.1
b.	Makes you feel unsafe	No	5,892	73.4
		Yes	2,131	26.6
c.	Messes up your physical living	No	6,700	84.0
	space (cleanliness, neatness, organization, etc.)	Yes	1,279	16.0
	mzation, etc.)			
d.	Adversely affects your involvement	No	6,918	86.8
u.	on an athletic team or in other orga-	Yes	1,048	13.2
	nized groups	103	1,070	10.4
e.	Prevents you from enjoying events	No	6,098	76.4
-	(concerts, sports, social activities,	Yes	1,886	23.6
	etc.)		,	-
f.	Interferes in other way(s)	No	5,808	73.1
		Yes	2,140	26.9

	Question	Response	#	%
g.	Doesn't interfere with my life	No	3,417	43.0
	•	Yes	4,536	57.0
81.	How interesting are most of your courses to you?	Very interesting and stimu- lating	1,787	21.9
	•	Quite interesting	3,537	43.3
		Fairly interesting	2,150	26.3
		Slightly interesting	528	6.5
		Very dull	168	2.1
82.	How often do you feel that the school work you are assigned is	Never	965	11.8
	meaningful and important?	Seldom	2,424	29.8
		Sometimes	2,504	30.7
		Often	1,403 692	17.2 8.5
		Almost always Always	158	1.9
		Aiways	130	1.5
83.	During the past year, how did you usually get beer, wine, or hard liquor?	I did not drink beer, wine, or hard liquor during the past year	5,714	71.4
		I bought them in a liquor store	1,274	15.9
		I gave someone else money to buy for me	173	2.2
		I had them at a party	396	5.0
		I had them at home	229	2.9
		A person 21or older gave them to me	176	2.2
		I took them from a family member	14	0.2
		I got them in some other way	23	0.3
84.	If you wanted to get some beer,	Very Hard	574	7.2
	wine or hard liquor (for example,	Sort of Hard	557	7.0
	vodka, whiskey, or gin), how easy would it be for you to get some?	Sort of Easy	1,271	16.0
		Very Easy	5,564	69.8
85.	If you wanted to get some mari- juana, how easy would it be for you	Very Hard	2,283	28.9
	to get some?	Sort of Hard	1,968	24.9
		Sort of Easy	2,190	27.7
		Very Easy	1,457	18.5
86.	If you wanted to get a drug like	Very Hard	3,664	46.6
	cocaine, LSD, or amphetamines,	Sort of Hard	2,371	30.1
	how easy would it be for you to get some?	Sort of Easy	1,278	16.2
		Very Easy	557	7.1

	Question	Response	#	%
	Question	Response	"	70
87.	If you wanted to get some prescription drugs for non-medical reasons,	Very Hard	2,200	27.9
	how easy would it be for you to get	Sort of Hard	2,013	25.6
	some?	Sort of Easy	2,092	26.6
		Very Easy	1,574	20.0
88.	In the past 12 months, have you spent more time using alcohol than	No	2,284	28.2
	you intended?	Yes	388	4.8
		Don't use	5,421	67.0
	In the past 12 months, have you spent more time using drugs than	No	1,089	13.5
	you intended?	Yes Don't use	151	1.9
		Don't use	6,806	84.6
89.	In the next 42 months, have you	No	0.050	20.0
09.	In the past 12 months, have you neglected some of your usual	Yes	2,252 361	28.0 4.5
	responsibilities because of using alcohol?	Tes Don't use	5,443	4.5 67.6
	alcolloi?	Don't use	5,445	07.0
	In the past 12 months, have you	No	1,029	12.8
	neglected some of your usual	Yes	150	1.9
	responsibilities because of using drugs?	Don't use	6,847	85.3
	arago.		-,	
90.	In the past 12 months, have you	No	1,919	23.9
	wanted to cut down on your alcohol	Yes	566	7.1
	use?	Don't use	5,546	69.1
	In the past 12 months, have you	No	771	9.6
	wanted to cut down on your drug use?	Yes	226	2.8
	use :	Don't use	7,013	87.6
91.		No	2,026	25.2
	objected to your alcohol use?	Yes	493	6.1
		Don't use	5,513	68.6
	In the past 12 months, has anyone	No	829	10.4
	objected to your drug use?	Yes	195	2.4
		Don't use	6,984	87.2
92.	In the past 12 months, did you frequently find yourself thinking about	No	1,957	24.3
	using alcohol?	Yes	678	8.4
		Don't use	5,414	67.3
	In the nest 12 months did you fro	No	962	10.7
	In the past 12 months, did you frequently find yourself thinking about	Yes	862 301	3.7
	using drugs?	Don't use	6,867	3. <i>1</i> 85.5
		2011 (400	0,001	00.0
93.	In the past 12 months, did you use	No	1,634	20.3
J.J.	alcohol to relieve feelings such as	Yes	918	11.4
	sadness, anger or boredom?	Don't use	5,510	68.4
			-,•	

	Question	Response	#	%
	In the past 12 months, did you use	No	778	9.7
	drugs to relieve feelings such as	Yes	312	3.9
	sadness, anger or boredom?	Don't use	6,963	86.5
94.	How wrong do you think it is for som	geone vour age to:		
a.	drink beer, wine or hard liquor (for	Very wrong	2,550	31.4
a.	example, vodka, whiskey or gin)	Wrong	1.893	23.3
	regularly, that is, at least once or twice a month?	A little bit wrong	1,093	13.1
	twice a month?	Not at all wrong	2,607	32.1
b.	smoke cigarettes?	Very wrong	3,447	42.5
		Wrong	2,277	28.1
		A little bit wrong	1,060	13.1
		Not at all wrong	1,324	16.3
•	smoke marijuana?	Vorusirona	4 902	59.3
C.	smoke marijuana?	Very wrong	4,803	21.4
		Wrong A little bit wrong	1,730 905	11.2
		· ·	905 666	8.2
		Not at all wrong	000	0.2
d.	use LSD, cocaine, amphetamines or	Very wrong	6,651	82.0
	another illegal drug?	Wrong	1,027	12.7
		A little bit wrong	266	3.3
		Not at all wrong	166	2.1
5.	How much do you think people risk I cally or in other ways) if they:	harming themselves (physi-		
a.	smoke one or more packs of ciga-	No risk	63	8.0
	rettes per day?	Slight risk	170	2.1
		Moderate risk	987	12.2
		Great risk	6,890	85.0
b.	try marijuana once or twice?	No risk	1,184	14.6
	•	Slight risk	1,981	24.5
		Moderate risk	1,828	22.6
		Great risk	3,103	38.3
C.	smoke marijuana regularly?	No risk	153	1.9
		Slight risk	767	9.5
		Moderate risk	1,699	21.0
		Great risk	5,457	67.6
d.		No risk	411	5.1
	holic beverage (beer, wine, liquor) nearly every day?	Slight risk	1,308	16.2
		Moderate risk	2,392	29.6
		Great risk	3,976	49.2

Qu	estion	Response	#	%
e. ta	ke five or more drinks in one	No risk	96	1.2
sit	ting	Slight risk	531	6.6
		Moderate risk	1,202	14.9
		Great risk	6,264	77.4
6. At	what age did you first use:			
a. Al	coholic beverages (including	Did not use	4,652	57.3
be	er, wine, or hard liquor)	Under 10	109	1.3
		10-11	82	1.0
		12-13	356	4.4
		14-15	758	9.3
		16-17	947	11.7
		18-20	826	10.2
		21-25	352	4.3
		26+	44	0.5
. Ma	avijuana (graca, nat) av haaki-b	Did not use	C 151	75.0
ivia (h	arijuana (grass, pot) or hashish ash, hash oil)	Under 10	6,154 9	75.9 0.1
•	•	10-11	23	0.1
		12-13	23 177	2.2
		14-15	437	5.4
		16-17	627	7.7
		18-20	494	6.1
		21-25	168	2.1
		26+	19	0.2
. LS	D or other psychedelics	Did not use	7,483	92.3
		Under 10	4	0.1
		10-11	1	0.0
		12-13	20	0.3
		14-15	101	1.2
		16-17	239	3.0
		18-20	172	2.1
		21-25	82	1.0
		26+	10	0.1
C/	ocaine or crack	Did not use	7,576	93.5
	Journe of Grack	Under 10	0	0.0
		10-11	0	0.0
		12-13	10	0.1
		14-15	40	0.5
		16-17	143	1.8
		18-20	197	2.4
		21-25	112	1.4
		26+	25	0.3

	Question	Response	#	%
e.	Inhalants, sniffed glue, breathed the	Did not use	7,650	94.5
	contents of an aerosol spray can, or inhaled other gases or sprays	Under 10	24	0.3
	(nitrous or poppers), in order to get	10-11	30	0.4
	high	12-13	81	1.0
		14-15	115	1.4
		16-17	114	1.4
		18-20	52	0.6
		21-25	25	0.3
		26+	5	0.1
f.	Phenoxydine (pox, px, breeze)	Did not use	8,108	100.0
g.	methamphetamines (meth, speed,	Did not use	7,729	95.6
	crank, crystal meth)?	Under 10	2	0.0
		12-13	7	0.1
		14-15	38	0.5
		16-17	91	1.1
		18-20	135	1.7
		21-25	58	0.7
		26+	27	0.3
h.	stimulants, other than methamphet-	Did not use	7,758	95.9
	amines (amphetamines, Ritalin,	Under 10	7	0.1
	Dexedrine) without a doctor telling you to take them	10-11	0	0.0
	you to take them	12-13	18	0.2
		14-15	55	0.7
		16-17	95	1.2
		18-20	98	1.2
		21-25	45	0.6
		26+	16	0.2
i.	Sedatives (tranquilizers, such as	Did not use	7,453	92.1
	valium or xanax, barbiturates, or	Under 10	3	0.0
	sleeping pills) without a doctor tell- ing you to take them	10-11	6	0.1
		12-13	16	0.2
		14-15	79	1.0
		16-17	167	2.1
		18-20	182	2.3
		21-25	124	1.5
		26+	58	0.7
j.	Heroin or other opiates (codeine,	Did not use	7,681	94.9
	oxycontin, Lortab) without a doctor	10-11	0	0.0
	telling you to take them.	12-13	13	0.2
		14-15	53	0.7
		16-17	117	1.5
		18-20	127	1.6
		21-25	83	1.0
				-

Question	Response	#	‡ %
k. DXM (dextromethorphan, drinking	Did not use	7,860	97.1
cough syrup to get high)	Under 10	7	0.1
	12-13	22	0.3
	14-15	47	0.6
	16-17	88	1.1
	18-20	57	0.7
	21-25	13	0.2
	26+	3	0.0
I. MDMA ('X,' 'E,' or ecstasy)	Did not use	7,755	95.8
i. Widwia (A, E, Of ecstasy)	Under 10	7,733	0.0
	12-13	0	0.0
		17	0.0
	14-15 16-17	73	0.2
	18-20		1.8
		149	
	21-25	83	1.0
	26+	18	0.2
m. Club drugs other than MDMA (such	Did not use	7,982	98.7
as GHB, rohypnol, or ketamine)	Under 10	1	0.0
	10-11	0	0.0
	12-13	1	0.0
	14-15	12	0.2
	16-17	27	0.3
	18-20	36	0.4
	21-25	24	0.3
	26+	7	0.1
97. I do the opposite of what people tell	Very false	4,932	60.8
me, just to get them mad.	Somewhat false	1,969	24.3
	Somewhat true	1,166	14.4
	Very true	49	0.6
98. I like to see how much I can get	Very false	4,635	57.2
away with.	Somewhat false	1,963	24.2
	Somewhat true	1,390	17.1
	Very true	119	1.5
99. I ignore rules that get in my way.	Very false	4,595	56.7
	Somewhat false	2,231	27.5
	Somewhat true	1,149	14.2

	Question	Response	#	%
100.	How many different sexual partners	0	3,912	48.7
	have you had in the past year (if	1	3,315	41.3
	less than 10, code answers as 00, 01, 02, etc.)?	2-3	513	6.4
	, , , , , , , , , , , , , , , , , , , ,	4-5	154	1.9
		6-7	58	0.7
		8-9	14	0.2
		10 or more	65	8.0
101.	How often did you or your partner	Not sexually active	3,662	45.5
	use a condom in the past year?	Never	1,910	23.7
		Sometimes	1,132	14.1
		Mostly	621	7.7
		Always	724	9.0
102.	During the past month, did you eat	No	4,095	50.5
	less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight?	Yes	4,011	49.5
103.	Sometimes I think that life is not	Definitely true	251	3.1
	worth it.	Mostly true	394	4.9
		Mostly not true	1,884	23.3
		Definitely not true	5,573	68.8
104.	At times I think I am no good at all.	Definitely true	296	3.7
	-	Mostly true	591	7.3
		Mostly not true	2,905	35.9
		Definitely not true	4,291	53.1
105.	All in all, I am inclined to think that I	Definitely true	186	2.3
	am a failure.	Mostly true	428	5.3
		Mostly not true	2,054	25.4
		Definitely not true	5,422	67.0
106.	In the past year, have you felt de-	Definitely true	441	5.5
	pressed or sad MOST days, even if	Mostly true	856	10.6
	you felt OK sometimes?	Mostly not true	2,327	28.8
		Definitely not true	4,464	55.2
107.		Never	78	1.0
	when riding in a car driven by someone else?	Rarely	201	2.5
	SOMEONE 6126 (Sometimes	431	5.3
		Most of the time	1,732	21.3
		Always	5,672	69.9
108.	How often do you wear a seatbelt	Never	101	1.3
	when driving a car?	Rarely	224	2.8
		Sometimes	333	4.1
		Most of the time	1,149	14.2
		Always	6,307	77.7

Question	Response	# %

We are interested in 2 types of physical activity: vigorous and moderate. Moderate physical activity includes activities such as walking, biking, vacuuming, gardening, or anything else that causes small increases in breathing or heart rate. Vigorous physical activity includes activities such as running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate.

	ing or heart rate.			
109.	In a usual week, how many days	0 days	360	4.5
	do you do moderate activites for at least 10 minutes at a time?	1 day	338	4.3
		2 days	630	7.9
		3 days	1,093	13.7
		4 days	871	10.9
		5 days	1,561	19.6
		6 days	1,270	16.0
		7 days	1,835	23.1
	In a usual week, how many days	0 days	1,344	16.8
	do you do vigorous activities for at least 10 minutes at a time?	1 day	1,092	13.7
	least to illinutes at a time?	2 days	1,450	18.2
		3 days	1,668	20.9
		4 days	909	11.4
		5 days	826	10.3
		6 days	464	5.8
		7 days	234	2.9
110.	On days when you do moderate or vigorous activities for at least 10 minutes at a time, how much total time per day do you spend doing	As time was reported in hours and minutes, we are not able to report frequen-	N/A	N/A
	those activities? (in hours and minutes):	cies and percentages for each response.		
111.	those activities? (in hours and	each response.		
111. a.	those activities? (in hours and minutes): Do you usually wear a helmet when y	each response.	2,573	31.8
	those activities? (in hours and minutes):	each response. you do the following: Never	2,573 1,086	31.8 13.4
	those activities? (in hours and minutes): Do you usually wear a helmet when y	each response. you do the following:	2,573 1,086 865	
	those activities? (in hours and minutes): Do you usually wear a helmet when y	each response. you do the following: Never Rarely	1,086	13.4
	those activities? (in hours and minutes): Do you usually wear a helmet when y	each response. you do the following: Never Rarely Sometimes	1,086 865	13.4 10.7
	those activities? (in hours and minutes): Do you usually wear a helmet when y	each response. you do the following: Never Rarely Sometimes Most of the time	1,086 865 842	13.4 10.7 10.4
	those activities? (in hours and minutes): Do you usually wear a helmet when y	each response. you do the following: Never Rarely Sometimes Most of the time Always	1,086 865 842 941	13.4 10.7 10.4 11.6
	those activities? (in hours and minutes): Do you usually wear a helmet when y	each response. you do the following: Never Rarely Sometimes Most of the time Always I do not participate in this	1,086 865 842 941	13.4 10.7 10.4 11.6
a.	those activities? (in hours and minutes): Do you usually wear a helmet when y	each response. you do the following: Never Rarely Sometimes Most of the time Always I do not participate in this	1,086 865 842 941	13.4 10.7 10.4 11.6
a.	those activities? (in hours and minutes): Do you usually wear a helmet when y ride a bicycle	each response. you do the following: Never Rarely Sometimes Most of the time Always I do not participate in this activity	1,086 865 842 941 1,794	13.4 10.7 10.4 11.6 22.1
a.	those activities? (in hours and minutes): Do you usually wear a helmet when y ride a bicycle	each response. you do the following: Never Rarely Sometimes Most of the time Always I do not participate in this activity Never	1,086 865 842 941 1,794	13.4 10.7 10.4 11.6 22.1
a.	those activities? (in hours and minutes): Do you usually wear a helmet when y ride a bicycle	each response. you do the following: Never Rarely Sometimes Most of the time Always I do not participate in this activity Never Rarely	1,086 865 842 941 1,794 3,008	13.4 10.7 10.4 11.6 22.1 37.3 9.0
a.	those activities? (in hours and minutes): Do you usually wear a helmet when y ride a bicycle	each response. you do the following: Never Rarely Sometimes Most of the time Always I do not participate in this activity Never Rarely Sometimes	1,086 865 842 941 1,794 3,008 727 443	13.4 10.7 10.4 11.6 22.1 37.3 9.0 5.5

	Question	Response	#	%
c.	water sports (kayaking, windsurf-	Never	2,855	35.5
	ing, etc.)	Rarely	598	7.4
		Sometimes	309	3.8
		Most of the time	163	2.0
		Always	154	1.9
		I do not participate in this activity	3,971	49.3
d.	summer sports not including water	Never	2,778	34.5
	sports (skating, rock climbing, etc.)	Rarely	925	11.5
		Sometimes	707	8.8
		Most of the time	429	5.3
		Always	368	4.6
		I do not participate in this activity	2,852	35.4
e.	motorcycle / scooter riding	Never	900	11.1
		Rarely	393	4.9
		Sometimes	486	6.0
		Most of the time	830	10.3
		Always I do not participate in this activity	1,764 3,700	21.8 45.8
112.	3	0 times	7,479	92.5
	many times were you in a physical fight?	1 time	355	4.4
		2 or 3 times	170	2.1
		4 or 5 times	42	0.5
		6 or 7 times	17	0.2
		8 or 9 times	4	0.0
		10 or 11 times 12 or more times	3 16	0.0 0.2
113.	How have you been feeling during	In excellent spirits	1,217	15.0
	the past week or two?	In very good spirits	2,361	29.2
		In good spirits mostly I have been up and down in spirits a lot	2,530 1,483	31.3 18.3
		In low spirits mostly	387	4.8
		In very low spirits	113	1.4
114.	Have you been bothered by nervousness or	Extremely so - to the point where I could not work or	151	1.9
-	your nerves during the past week or two?	take care of things	570	7.0
		Very much so Quite a bit	579 907	7.2 11.2
		Some - enough to bother me	1,554	19.2
		A little Not at all	3,105 1,780	38.4 22.0
			.,. 50	

	Question	Response	#	%
115.	Have you been in firm control of	Yes, definitely so	2,623	32.5
113.	your behavior, thoughts, emotions,	Yes, for the most part	3,045	37.7
	or feelings during the past week or two?	Generally so	1,615	20.0
		Not too well	535	6.6
		No, and I am somewhat disturbed	186	2.3
		No, and I am very disturbed	78	1.0
116.	Have you felt so sad, discouraged, hopeless or had so many problems that you wondered if anything was	Extremely so to the point that I have just about given up	117	1.5
	worthwhile during the past week or two?	Very much so	221	2.7
	two:	Quite a bit	344	4.3
		Some - enough to bother me	822	10.2
		A little	1,951	24.2
		Not at all	4,601	57.1
117.	How happy, satisfied, or pleased have you been with your personal life during the past week or two?	Extremely happy could not have been more satisfied or pleased	1,003	12.5
		Very happy	3,235	40.2
		Fairly happy	1,764	21.9
		Satisfied, pleased	768	9.5
		Somewhat dissatisfied	990 288	12.3 3.6
		Very dissatisfied	200	3.0
118.	were under any strain, stress, or	Yes, almost more than I can bear or stand	420	5.2
	pressure during the past week or two?	Yes, quite a bit of pressure	2,096	26.0
		Yes, some - more than usual	1,971	24.5
		Yes, some - about usual	2,076	25.8
		Yes, a little	1,127	14.0
		Not at all	361	4.5
119.	Have you had any reason to wonder	Not at all	4,960	61.6
113.	Have you had any reason to wonder if you were losing control over the	Only a little	1,494	18.6
	way you talk, think or feel during	Some, but not enough to be	745	9.3
	the past week or two?	concerned or worried about	745	0.0
		Some, and I have been a little concerned	587	7.3
		Some, and I am quite con- cerned	159	2.0
		Yes, and I am very con- cerned	108	1.3

	Question	Response	#	%
120.	Have you been anxious, worried or upset during the past week or two?	Extremely - to the point of being sick or almost sick	295	3.7
		Very much so	546	6.8
		Quite a bit	962	11.9
		Some-enough to bother me	1,603	19.9
		A little	3,354	41.6
		Not at all	1,303	16.2
121.	Have you felt down-hearted and blue during the past week or two?	All the time	117	1.4
		Most of the time	314	3.9
		A good bit of the time	568	7.0
		Some of the time	1,314	16.3
		A little of the time	3,199	39.7
		None of the time	2,542	31.6
122.	riare year neem is emissionally	All the time	1,756	21.8
	stable and sure of yourself during the past week or two?	Most of the time	3,468	43.0
	·	A good bit of the time	915	11.3
		Some of the time	929	11.5
		A little of the time	627	7.8
		None of the time	366	4.5
123.	How many days per week do you eat at least five servings of fruits & vegetables?	Rarely or never	2,251	27.9
		2-3 days a week	3,636	45.1
		4-6 days a week	1,630	20.2
		Every day	551	6.8
124.	How easy is it to get healthy food options on campus?	Very easy	1,141	14.4
		Somewhat easy	3,333	42.1
		Somewhat hard	2,556	32.3
		Very hard	884	11.2
125.	Which of the following categories apply to you? Please do not include membership in professional, academic, or religious fraternities.	I currently belong to a so- cial fraternity or sorority	218	2.9
		I formerly belonged to a social fraternity or sorority	322	4.2
		I have never belonged to a social fraternity or sorority	7,059	92.5
		I am a little sister to a social fraternity	32	0.4
126.	How often do you participate in	Very often	347	4.3
	campus or school-sponsored social	Quite often	1,002	12.4
	activities?	Infrequently	2,462	30.6
		Rarely or never	4,238	52.7
127.		Definitely would	760	9.5
	campus or school-sponsored social activities if there were more options available?	Probably would	3,153	39.2
		Probably would not	3,582	44.6
		Definitely would not	543 6.8	6.8

	Question	Response	#	%	
128.	Are you less likely to drink alco- hol or use other drugs on nights	I don't ever drink alcohol or use drugs	5,687	71.2	
		that you participate in campus or school-sponsored social activities?	I don't participate in cam- pus or school-sponsored social activities	1,096	13.7
		I am much less likely to drink alcohol or use drugs	396	5.0	
			I am somewhat less likely to drink alcohol or use drugs	245	3.1
		I am equally likely to drink alcohol or use drugs	451	5.7	
		I am somewhat more likely to drink alcohol or use drugs	74	0.9	
		I am much more likely to drink alcohol or use drugs	38	0.5	
129.	129. Please indicate the reasons you do not participate in more campus or school-sponsored social activities. (Please mark all that apply.)	I already participate in a lot of extracurricular activities on campus	819	13.7 5.0 3.1 5.7 0.9	
		I don't have enough time to participate	5,870	73.6	
		It is too expensive to par- ticipate	982	12.3	
		I am not aware of the activi- ties or I find out too late	3,348	42.0	
		I have too many family obligations	2,548	32.0	
		I just don't want to partici- pate	2,293	28.8	
		I prefer other activities	3,246	40.7	
		The times that activities are offered are usually not good for me	2,588	32.5	
		I don't like the people who participate in campus activities	635	8.0	
		There are not enough activities offered	824	10.3	
		I'm usually not interested in the kinds of activities cur- rently offered	2,489	31.2	
130.	Within the last 12 months, how	Never	7,189	89.3	
	many times have you seriously	1-2 times	553	6.9	
	considered attempting suicide?	3-4 times	141	1.8	
		5-6 times	49	0.6	
		7-8 times	30	0.4	
		9-10 times	11	0.1	
		11+ times	74	0.9	

	Question	Response	#	%	
	Question	Кезропзе	π	/0	
131.	Within the last 12 months, how	Never	7,921	98.5	
	many times have you attempted suicide?	1-2 times	91	1.1	
		3-4 times	15	0.2	
		5-6 times	6	0.1	
		7-8 times	4	0.0	
		9-10 times	2	0.0	
		11+ times	2	0.0	
132.	These questions ask about gambling During the past 12 months, how ofter				
a.	Gambled at a casino	Never	5,924	73.6	
		Before, but not in past year	866	10.8	
		A few times in the past year	1,191	14.8	
		Once a month	47	0.6	
		Once a week or more	12	0.1	
		Almost every day	3	0.0	
b.	Played the lottery or lottery scratch-	Never	6,622	82.4	
	off tickets	Before, but not in past year	689	8.6	
		A few times in the past year	672	8.4	
		Once a month	28	0.3	
		Once a week or more	18	0.2	
		Almost every day	7	0.1	
C.	Bet on sporting events	Never	7,022	87.4	
0.	200 On Operating Overline	Before, but not in past year	405	5.0	
		A few times in the past year	516	6.4	
		Once a month	55	0.7	
		Once a week or more	25	0.3	
		Almost every day	7	0.1	
d.	Played cards for money	Never	6,346	79.1	
		Before, but not in past year	656	8.2	
		A few times in the past year	822	10.2	
		Once a month	145	1.8	
		Once a week or more	52	0.7	
		Almost every day	4	0.1	
e.	Bet money on horse races	Never	7,734	96.9	
€.	Det money on noise faces	Before, but not in past year	206	2.6	
		A few times in the past year	206 36	2.6 0.5	
		Once a month	36 4	0.0	
			Once a month Once a week or more	3	0.0
		Almost every day	3	0.0	

	Question	Response	#	%
f.	Played bingo for money or prizes	Never	6.978	87.1
	,	Before, but not in past year	572	7.1
		A few times in the past year	431	5.4
		Once a month	16	0.2
		Once a week or more	10	0.1
		Almost every day	9	0.1
g.	Gambled on the internet	Never	7,807	97.5
		Before, but not in past year	76	1.0
		A few times in the past year	82	1.0
		Once a month	20	0.3
		Once a week or more	12	0.1
		Almost every day	11	0.1
h.	Bet on dice games such as craps	Never	7,530	94.0
		Before, but not in past year	233	2.9
		A few times in the past year	219	2.7
		Once a month	14	0.2
		Once a week or more	4	0.1
		Almost every day	7	0.1
i.	Bet on games of personal skill such	Never	7,039	87.8
	as pool, darts, or bowling	Before, but not in past year	399	5.0
		A few times in the past year	482	6.0
		Once a month	67	8.0
		Once a week or more	22	0.3
		Almost every day	8	0.1
j.	Bet on video poker	Never	7,496	93.4
		Before, but not in past year	250	3.1
		A few times in the past year	253	3.2
		Once a month	12	0.1
		Once a week or more	12	0.2
		Almost every day	5	0.1